

STANDARD FORM 64
October 1960
PREPARED BY U. S. CIVIL SERVICE COM.
Federal Personnel Manual
60-102

SECRET

Official Personnel Folder

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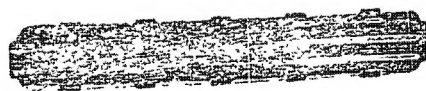
(N)

69 Fd Cuts

29 SEP 1969

40005 JAMES S
502-16-6500

02/20/78



SECRET

(When Filled In)

08 AUG 1978

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER				2. NAME (Last-First-Middle)	
RETIREMENT - (VOLUNTARY) CIARDS				3. EFFECTIVE DATE REQUESTED	
				MONTH DAY YEAR 08 04 78	
4. FUND				5. CATEGORY OF EMPLOYMENT	
V TO V				REGULAR	
V TO O				6. LEGAL AUTHORITY (Completed by Office of Personnel)	
O TO V				8026-3430 0000	
O TO O				9. ORGANIZATIONAL DESIGNATION	
DBO/IMS AND INFORMATION MGMT & PLANNING GROUP RECORDS MANAGEMENT BRANCH AREAS UNIT				10. LOCATION OF OFFICIAL STATION	
				WASH., D.C.	
11. POSITION TITLE				12. POSITION NUMBER	
RECORDS ADMIN OFF NR (13)				CG45	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES	
GS				0344.01	
16. GRADE AND STEP				17. SALARY OR RATE	
13 2				\$26,889	
18. REMARKS					
Last Working Day: 4 August 1978					
CONCUR: [Signature] Date 7/26/78					
co-ordinated with: [Signature] 7/31/78					
19. SIGNATURE OF REQUESTING OFFICIAL					
DATE SIGNED 7/26/78					
20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER					
DATE SIGNED 7/26/78					
21. ACTION CODE					
45 10					
22. OFFICE CODING					
23. STATION CODE					
24. INTEGRITY CODE					
25. DATE OF BIRTH					
26. DATE OF GRADE					
27. DATE OF LEI					
28. RETIREMENT DATA					
29. SPECIAL REFERENCE					
30. SEPARATION DATA					
31. CORRECTION/CANCELLATION DATA					
32. SECURITY REQ. NO.					
33. SEX					
34. VET PREFERENCE					
35. SERV COMP DATE					
36. LONG COMP DATE					
37. CAREER CATEGORY					
38. FEDERAL TAX DATA					
39. STATE TAX DATA					
40. SOCIAL SECURITY NO.					
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE					
42. LEAVE CAT CODE					
43. FEDERAL TAX DATA					
44. STATE TAX DATA					
45. POSITION CONTROL CERTIFICATION					
46. O.P. APPROVAL					
DATE APPROVED 8/1/78					

FORM 1152 USE PREVIOUS EDITION

SECRET

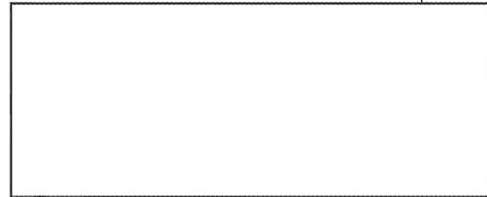
E-2, IMPDET CL. BY.

(4)

25 July 1978

SUMMARY OF AGENCY EMPLOYMENT

I entered on duty with the CIA in April 1952 and have been in records management for my whole career, seventeen years of it overseas.



NO SECURITY RECTIONS
[Signature]

SECRET
(When Filled In)

16 MAY 1978

10-125710-78

OCF REQUEST FOR PERSONNEL ACTION

DATE PREPARED
9 May 1978

1. SERIAL NUMBER 2. NAME (Last-First-Middle)

3. NATURE OF PERSONNEL ACTION
REASSIGNMENT

4. EFFECTIVE DATE REQUESTED
MONTH: 04 DAY: 09 YEAR: 78

5. CATEGORY OF EMPLOYMENT
REGULAR

6. FUNDS
V TO V V TO O
O TO V O TO O

7. FAN AND NSCA
6026-3430-0000

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS
DDO/IMS
INFORMATION, MGMT AND PLANNING GROUP
RECORDS MANAGEMENT BRANCH
AREAS UNIT

10. LOCATION OF OFFICIAL STATION
NASH., D.C.

11. POSITION TITLE
RECORDS ADMIN OFF (13)

12. POSITION NUMBER
CG45

13. CAREER SERVICE DESIGNATION
DCC

14. CLASSIFICATION SYMBOL (A-E, GS, etc.)
GS

15. OCCUPATIONAL SERIES
0344.01

16. GRADE AND STEP
13 2

17. SALARY OR RATE
\$26,889

18. REMARKS
FROM: DDO/NE
CONCUR: (telecord)
C/NE/Pers
DATE
05/10/78

19A. SIGNATURE OF REQUESTING OFFICIAL
DATE SIGNED 5/10/78

19B. SIGNATURE OF APPROVING OFFICIAL
DATE SIGNED 5/11/78

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL DDO/CAS/07-12

19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC 53746 ALPHABETIC IMS	22 STATION CODE 75013	23 INTEGRE CODE	24 MONTHS CODE	25 DATE OF BIRTH MO. DA. YR.	26 DATE OF GRADE MO. DA. YR.	27 DATE OF LEI MO. DA. YR.	
28 RATE EXPRES. MO. DA. YR.	29 SPECIAL REFERENCE	30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE MO. DA. YR.	EOD DATA			33 SECURITY REQ. NO.	34 SER.
35 VET PREFERENCE CODE 0-NO 1-1 PT 2-10 PT	36 SERV COMP DATE MO. DA. YR.	37 LONG. COMP DATE MO. DA. YR.	38 CAREER CATEGORY CODE	39 FEGLI/HEALTH INSURANCE CODE	40 SOCIAL SECURITY NO.				
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO EMPLOY IN SERVICE 2-SERVE IN SERVICE (LESS THAN 3 YEARS) 3-SERVE IN SERVICE (MORE THAN 3 YEARS)	42 LEAVE CAT. CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE	44 STATE TAX DATA FORM EXECUTED CODE			45 POSITION CONTROL CERTIFICATION 30 MAY 1978-12-78 From We			

DATE APPROVED 5/26/78

SECRET
(When Filled In)

C REQUEST FOR PERSONNEL ACTION						DATE PREPARED 6 Feb 78	
1 SERIAL NUMBER		2 NAME (Last-First-Middle)					
3 NATURE OF PERSONNEL ACTION PROMOTION		4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 12 78		5 CATEGORY OF EMPLOYMENT REGULAR			
6 PLANS		V TO V		V TO O		7 FAR AND NSCA 3033 4800 0000	
O TO V		O TO O		8 LEGAL AUTHORITY (Complied by Office of Personnel)			
9 ORGANIZATIONAL DESIGNATIONS DDO/NE DIVISION OFFICE OF THE CHIEF, NE DIVISION PLANS STAFF				10 LOCATION OF OFFICIAL STATION WASH, D.C.			
11 POSITION TITLE RECORDS ADMIN OFF				12 POSITION NUMBER CG45		13 CAREER SERVICE DESIGNATION DCC	
14 CLASSIFICATION SCHEDULE (GS, LS, WS)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE	
GS		0344.01		13 & 2		265896	
18 REMARKS CONCUR: (telecoord) ISS From 125 6 Feb 78 Date							
PERSONNEL ACTION REPORT DATE SIGNED 6 Feb 78 SIGNATURE [Signature] MOVING OFFICER [Signature] DATE SIGNED 2/5/78							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19 ACTIONS CODE 22 10		20 OFFICE CODING 46015 NE		21 STATION CODE 75013		22 INTEGRITY CODE	
23 MONTHLY CODE		24 DATE OF BIRTH		25 DATE OF GRADE		26 DATE OF LIT	
27 DATE EXPLOS		28 SPECIAL REFERENCE		29 RETIREMENT DATA		30 SEPARATION DATA CODE	
31 TYPE		32 CORRECTION/CANCELLATION DATA		33 SECURITY REQ. NO		34 SEX	
35 PAY PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY	
39 HEALTH INSURANCE		40 SOCIAL SECURITY NO		41 FEDERAL TAX DATA		42 STATE TAX DATA	
43 PREVIOUS CIVILIAN GOVERNMENT SERVICE		44 LEAVE CAT CODE		45 FEDERAL TAX DATA		46 STATE TAX DATA	
47 POSITION CONTROL CERTIFICATION		48 DATE APPROVED		49 DATE APPROVED		50 DATE APPROVED	
3-6-78 AEO		06 MAR 1978		06 MAR 78		06 MAR 78	

18 August 1978



We are enclosing the employee copy of your retirement action (Form 1150) that you requested 04 August 1978.

Sincerely,

151


Chief, Control Division

Enclosure: 1 Form

Dist.

Orig. - Adse.

1 - TRB

1 - OP

OP/TRB

UG78)

ADMINISTRATIVE-INTERNAL USE ONLY

18 APR 1978

MEMORANDUM FOR:

FROM: John N. McMahon
Deputy Director for Operations

SUBJECT: Commendation for Exceptional Performance

1. The Directorate of Operations Records Review Task Force has finished its work . I want you to know that I realize that a large measure of the success of this effort was due to the exceptional performance of the Records Management Officers who worked long and hard during the six-month period, patiently guiding the 435 Directorate personnel who served on the component teams. Many of you performed additional duties, voluntarily and cheerfully, extending beyond the ten-hour work day, which kept the task force functioning smoothly.

2. This fine team effort and your personal contribution to it is in the best tradition of the Directorate of Operations. I commend you for a job well done.

Thank you

John N. McMahon

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1 AUG 1978

MEMORANDUM FOR: Director of Personnel

FROM : [REDACTED]
Chief, Retirement Affairs Division

SUBJECT : Request for Voluntary Retirement -
[REDACTED]

1. This memorandum submits a recommendation for your approval in paragraph 3.

2. The employee named above has applied for voluntary retirement under the provisions of Headquarters Regulation 20-50h.

Grade: GS-13	Position: Records Management Officer
Career Service	Operations
Office/Division	Information Management Staff
Date Requested for Retirement:	4 August 1978
Age at that Date	50
Years of Creditable Service	29
Years of Agency Service	26
Years of Qualifying Service	9

3. The applicant's Career Service and the CIA Retirement Board recommend that the request be approved.

/s/ [REDACTED]

The recommendation contained in paragraph 3 is approved.

(SIGNED) F. W. H. [REDACTED]

Director of Personnel

2 AUG 1978

Date

Distribution:

- 0 - Return to ROB
- 1 - Applicant
- 1 - OPF
- 1 - ROB Soft File
- 1 - ROB Reader

[REDACTED]

CONFIDENTIAL

DATE PREPARED 21
5 Oct 1977

~~FROM~~ CCS

SECRET

(When Filled In)

C-20

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER				2. NAME (Last-First-Middle)	
3. PURPOSE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED	
CHANGE OF PAY GRADE				08 09 76	
5. FAN AND NSCA				6. OFFICE AUTHORITY (Completed by Office of Personnel)	
T230 0130 0002					
7. ORGANIZATIONAL DESIGNATION				8. LOCATION OF OFFICIAL STATION	
DDC/CCS REGISTRY				WASH., D. C.	
9. POSITION NUMBER				10. POSITION NUMBER	
REGISTRY ADMIN OFF CH				BL 14	
11. CLASSIFICATION SYMBOL (GS, GS, etc.)				12. GRADE AND STEP	
GS				12 4	
13. OCCUPATIONAL SERIES				14. GRADE AND STEP	
0344.01				12 4	
15. REMARKS				16. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
				DATE SIGNED	
Off 9 Aug 76				DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
17. ACTION CODE	18. EMPLOY CODE	19. OFFICE CODES	20. STATION CODE	21. INTEGRITY CODE	22. NOTES CODE
37	10	39115 CCS	75013		
23. DATE OF BIRTH	24. DATE OF BIRTH	25. DATE OF BIRTH	26. DATE OF BIRTH	27. DATE OF BIRTH	28. DATE OF BIRTH
29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION / CANCELLATION DATA	33. SECURITY	34. SEC
35. PREFERENCE	36. VERY COMP DATA	37. LONG COMP DATA	38. CAREER CATEGORY	39. PERS / HEALTH INSURANCE	40. SOCIAL SECURITY NO
41. PERMITS (FEDERAL GOVERNMENT SERVICE)	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA	45. POSITION CONTROL CERTIFICATION	46. O.P. APPROVAL
10 AUG 1976				DATE APPROVED	

FORM 1152 USE PREVIOUS EDITION

SECRET

E-2. COMDET CL BY: (4)

SECRET
 (U) No Filled In

REQUEST FOR PERSONNEL ACTION										DATE PREPARED 13 July 1976	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)									
3. NATURE OF PERSONNEL ACTION Reassignment - Change of Home Base CHANGE OF SERVICE DESIGNATION										4. EFFECTIVE DATE REQUESTED MONTH 07 DAY 13 YEAR 76	
5. CATEGORY OF EMPLOYMENT REGULAR										6. FROM AUTHORITY (Completed by Office of Personnel)	
7. FUND		XX V TO V		V TO O		7. PER. AND USCA		8. 230 0118		0000	
9. ORGANIZATIONAL DESIGNATIONS DDO/CCS REGISTRY										10. LOCATION OF OFFICIAL STATION WASH., D. C.	
11. POSITION TITLE RSCORPS AIR/IN OF CH										12. POSITION NUMBER RL 1A	
13. CAREER SERVICE DESIGNATION DCC										14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	
15. OCCUPATIONAL SERIES 0311.01										16. GRADE AND STEP 12 4	
17. SALARY OR RATE \$ 21,324										18. REMARKS DCC to DCC DESIGNATION CHANGED FROM DAG TO DCC.	
19. DATE SIGNED 13 Jul 76										20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
21. DATE SIGNED										22. DATE SIGNED	
23. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
24. ACTION CODE 37-10		25. EMPLOY CODE 37-10		26. OFFICE CODING HOLDSHIP ALPHABETIC CCS		27. STATION CODE 75013		28. INTEREST CODE		29. ADJUST CODE	
30. DATE OF BIRTH		31. DATE OF GRADE		32. DATE OF LEI		33. SECURITY REG-BD		34. SECURITY REG-BD		35. SECURITY REG-BD	
36. SPECIAL REFERENCE		37. RETIREMENT DATA		38. SEPARATION DATA CODE		39. COUNTRY OF ORIGIN DATA		40. HEALTH INSURANCE		41. SOCIAL SECURITY NO.	
42. CIVILIAN GOVERNMENT SERVICE		43. LEAVE CAT CODE		44. RESERVE TAG DATA		45. STATE TAX DATA		46. STATE TAX DATA		47. STATE TAX DATA	
48. POSITION CONTROL CERTIFICATION		49. DATE APPROVED		50. DATE APPROVED		51. DATE APPROVED		52. DATE APPROVED		53. DATE APPROVED	

SECRET

12. IMPORT CL. BY:

CR

11-22-74

C. Macey

SECRET

(If App. Filled In)

f/cf REQUEST FOR PERSONNEL ACTION				DATE PREPARED 13 November 1974	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)			
3. NATURE OF PERSONNEL ACTION PROMOTION					
4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT			
MONTH DAY YEAR 11 24 74		REGULAR			
6. FUND		7. PAY AND NSCA		8. ISOM AUTHORITY (Completed by Office of Personnel)	
XX V TO V C TO V		5230 0121 0002		50 USC 403 J	
9. ORGANIZATIONAL DESIGNATION			10. LOCATION OF OFFICE/STATION		
DDO/CCS REGISTRY			WASH., D. C.		
11. POSITION TITLE		12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION	
RECORDS ADMIN OF CH (12)		0061		DAC	
14. CLASSIFICATION SCHEME (GS, FA, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP	
GS		0344.01		12 3	
17. SALARY OR RATE		18. REMARKS			
\$ 19,693		CONCURRE: _____ (TELECORD) SS/SE/FEZ5			
DATE SIGNED		SIGNATURE		DATE SIGNED	
13 Nov 74		[Signature]		15 Nov 74	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL:					
19. ACTION CODE	20. EMPLOY CODE	21. OTHER CODES	22. STATION CODE	23. INTEREST CODE	24. MOTIV CODE
2.2	10.	391157 CC3	75613		
25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF TEST	28. DATE OF ENTRY	29. DATE OF DEATH	30. DATE OF RETIREMENT
11/24/74	11/24/74				
31. DATE OF BIRTH	32. DATE OF GRADE	33. DATE OF TEST	34. DATE OF ENTRY	35. DATE OF DEATH	36. DATE OF RETIREMENT
37. DATE OF BIRTH	38. DATE OF GRADE	39. DATE OF TEST	40. DATE OF ENTRY	41. DATE OF DEATH	42. DATE OF RETIREMENT
43. DATE OF BIRTH	44. DATE OF GRADE	45. DATE OF TEST	46. DATE OF ENTRY	47. DATE OF DEATH	48. DATE OF RETIREMENT
49. DATE OF BIRTH	50. DATE OF GRADE	51. DATE OF TEST	52. DATE OF ENTRY	53. DATE OF DEATH	54. DATE OF RETIREMENT
55. DATE OF BIRTH	56. DATE OF GRADE	57. DATE OF TEST	58. DATE OF ENTRY	59. DATE OF DEATH	60. DATE OF RETIREMENT
61. DATE OF BIRTH	62. DATE OF GRADE	63. DATE OF TEST	64. DATE OF ENTRY	65. DATE OF DEATH	66. DATE OF RETIREMENT
67. DATE OF BIRTH	68. DATE OF GRADE	69. DATE OF TEST	70. DATE OF ENTRY	71. DATE OF DEATH	72. DATE OF RETIREMENT
73. DATE OF BIRTH	74. DATE OF GRADE	75. DATE OF TEST	76. DATE OF ENTRY	77. DATE OF DEATH	78. DATE OF RETIREMENT
79. DATE OF BIRTH	80. DATE OF GRADE	81. DATE OF TEST	82. DATE OF ENTRY	83. DATE OF DEATH	84. DATE OF RETIREMENT
85. DATE OF BIRTH	86. DATE OF GRADE	87. DATE OF TEST	88. DATE OF ENTRY	89. DATE OF DEATH	90. DATE OF RETIREMENT
91. DATE OF BIRTH	92. DATE OF GRADE	93. DATE OF TEST	94. DATE OF ENTRY	95. DATE OF DEATH	96. DATE OF RETIREMENT
97. DATE OF BIRTH	98. DATE OF GRADE	99. DATE OF TEST	100. DATE OF ENTRY	101. DATE OF DEATH	102. DATE OF RETIREMENT
103. DATE OF BIRTH	104. DATE OF GRADE	105. DATE OF TEST	106. DATE OF ENTRY	107. DATE OF DEATH	108. DATE OF RETIREMENT
109. DATE OF BIRTH	110. DATE OF GRADE	111. DATE OF TEST	112. DATE OF ENTRY	113. DATE OF DEATH	114. DATE OF RETIREMENT
115. DATE OF BIRTH	116. DATE OF GRADE	117. DATE OF TEST	118. DATE OF ENTRY	119. DATE OF DEATH	120. DATE OF RETIREMENT
121. DATE OF BIRTH	122. DATE OF GRADE	123. DATE OF TEST	124. DATE OF ENTRY	125. DATE OF DEATH	126. DATE OF RETIREMENT
127. DATE OF BIRTH	128. DATE OF GRADE	129. DATE OF TEST	130. DATE OF ENTRY	131. DATE OF DEATH	132. DATE OF RETIREMENT
133. DATE OF BIRTH	134. DATE OF GRADE	135. DATE OF TEST	136. DATE OF ENTRY	137. DATE OF DEATH	138. DATE OF RETIREMENT
139. DATE OF BIRTH	140. DATE OF GRADE	141. DATE OF TEST	142. DATE OF ENTRY	143. DATE OF DEATH	144. DATE OF RETIREMENT
145. DATE OF BIRTH	146. DATE OF GRADE	147. DATE OF TEST	148. DATE OF ENTRY	149. DATE OF DEATH	150. DATE OF RETIREMENT
151. DATE OF BIRTH	152. DATE OF GRADE	153. DATE OF TEST	154. DATE OF ENTRY	155. DATE OF DEATH	156. DATE OF RETIREMENT
157. DATE OF BIRTH	158. DATE OF GRADE	159. DATE OF TEST	160. DATE OF ENTRY	161. DATE OF DEATH	162. DATE OF RETIREMENT
163. DATE OF BIRTH	164. DATE OF GRADE	165. DATE OF TEST	166. DATE OF ENTRY	167. DATE OF DEATH	168. DATE OF RETIREMENT
169. DATE OF BIRTH	170. DATE OF GRADE	171. DATE OF TEST	172. DATE OF ENTRY	173. DATE OF DEATH	174. DATE OF RETIREMENT
175. DATE OF BIRTH	176. DATE OF GRADE	177. DATE OF TEST	178. DATE OF ENTRY	179. DATE OF DEATH	180. DATE OF RETIREMENT
181. DATE OF BIRTH	182. DATE OF GRADE	183. DATE OF TEST	184. DATE OF ENTRY	185. DATE OF DEATH	186. DATE OF RETIREMENT
187. DATE OF BIRTH	188. DATE OF GRADE	189. DATE OF TEST	190. DATE OF ENTRY	191. DATE OF DEATH	192. DATE OF RETIREMENT
193. DATE OF BIRTH	194. DATE OF GRADE	195. DATE OF TEST	196. DATE OF ENTRY	197. DATE OF DEATH	198. DATE OF RETIREMENT
199. DATE OF BIRTH	200. DATE OF GRADE	201. DATE OF TEST	202. DATE OF ENTRY	203. DATE OF DEATH	204. DATE OF RETIREMENT
205. DATE OF BIRTH	206. DATE OF GRADE	207. DATE OF TEST	208. DATE OF ENTRY	209. DATE OF DEATH	210. DATE OF RETIREMENT
211. DATE OF BIRTH	212. DATE OF GRADE	213. DATE OF TEST	214. DATE OF ENTRY	215. DATE OF DEATH	216. DATE OF RETIREMENT
217. DATE OF BIRTH	218. DATE OF GRADE	219. DATE OF TEST	220. DATE OF ENTRY	221. DATE OF DEATH	222. DATE OF RETIREMENT
223. DATE OF BIRTH	224. DATE OF GRADE	225. DATE OF TEST	226. DATE OF ENTRY	227. DATE OF DEATH	228. DATE OF RETIREMENT
229. DATE OF BIRTH	230. DATE OF GRADE	231. DATE OF TEST	232. DATE OF ENTRY	233. DATE OF DEATH	234. DATE OF RETIREMENT
235. DATE OF BIRTH	236. DATE OF GRADE	237. DATE OF TEST	238. DATE OF ENTRY	239. DATE OF DEATH	240. DATE OF RETIREMENT
241. DATE OF BIRTH	242. DATE OF GRADE	243. DATE OF TEST	244. DATE OF ENTRY	245. DATE OF DEATH	246. DATE OF RETIREMENT
247. DATE OF BIRTH	248. DATE OF GRADE	249. DATE OF TEST	250. DATE OF ENTRY	251. DATE OF DEATH	252. DATE OF RETIREMENT
253. DATE OF BIRTH	254. DATE OF GRADE	255. DATE OF TEST	256. DATE OF ENTRY	257. DATE OF DEATH	258. DATE OF RETIREMENT
259. DATE OF BIRTH	260. DATE OF GRADE	261. DATE OF TEST	262. DATE OF ENTRY	263. DATE OF DEATH	264. DATE OF RETIREMENT
265. DATE OF BIRTH	266. DATE OF GRADE	267. DATE OF TEST	268. DATE OF ENTRY	269. DATE OF DEATH	270. DATE OF RETIREMENT
271. DATE OF BIRTH	272. DATE OF GRADE	273. DATE OF TEST	274. DATE OF ENTRY	275. DATE OF DEATH	276. DATE OF RETIREMENT
277. DATE OF BIRTH	278. DATE OF GRADE	279. DATE OF TEST	280. DATE OF ENTRY	281. DATE OF DEATH	282. DATE OF RETIREMENT
283. DATE OF BIRTH	284. DATE OF GRADE	285. DATE OF TEST	286. DATE OF ENTRY	287. DATE OF DEATH	288. DATE OF RETIREMENT
289. DATE OF BIRTH	290. DATE OF GRADE	291. DATE OF TEST	292. DATE OF ENTRY	293. DATE OF DEATH	294. DATE OF RETIREMENT
295. DATE OF BIRTH	296. DATE OF GRADE	297. DATE OF TEST	298. DATE OF ENTRY	299. DATE OF DEATH	300. DATE OF RETIREMENT
301. DATE OF BIRTH	302. DATE OF GRADE	303. DATE OF TEST	304. DATE OF ENTRY	305. DATE OF DEATH	306. DATE OF RETIREMENT
307. DATE OF BIRTH	308. DATE OF GRADE	309. DATE OF TEST	310. DATE OF ENTRY	311. DATE OF DEATH	312. DATE OF RETIREMENT
313. DATE OF BIRTH	314. DATE OF GRADE	315. DATE OF TEST	316. DATE OF ENTRY	317. DATE OF DEATH	318. DATE OF RETIREMENT
319. DATE OF BIRTH	320. DATE OF GRADE	321. DATE OF TEST	322. DATE OF ENTRY	323. DATE OF DEATH	324. DATE OF RETIREMENT
325. DATE OF BIRTH	326. DATE OF GRADE	327. DATE OF TEST	328. DATE OF ENTRY	329. DATE OF DEATH	330. DATE OF RETIREMENT
331. DATE OF BIRTH	332. DATE OF GRADE	333. DATE OF TEST	334. DATE OF ENTRY	335. DATE OF DEATH	336. DATE OF RETIREMENT
337. DATE OF BIRTH	338. DATE OF GRADE	339. DATE OF TEST	340. DATE OF ENTRY	341. DATE OF DEATH	342. DATE OF RETIREMENT
343. DATE OF BIRTH	344. DATE OF GRADE	345. DATE OF TEST	346. DATE OF ENTRY	347. DATE OF DEATH	348. DATE OF RETIREMENT
349. DATE OF BIRTH	350. DATE OF GRADE	351. DATE OF TEST	352. DATE OF ENTRY	353. DATE OF DEATH	354. DATE OF RETIREMENT
355. DATE OF BIRTH	356. DATE OF GRADE	357. DATE OF TEST	358. DATE OF ENTRY	359. DATE OF DEATH	360. DATE OF RETIREMENT
361. DATE OF BIRTH	362. DATE OF GRADE	363. DATE OF TEST	364. DATE OF ENTRY	365. DATE OF DEATH	366. DATE OF RETIREMENT
367. DATE OF BIRTH	368. DATE OF GRADE	369. DATE OF TEST	370. DATE OF ENTRY	371. DATE OF DEATH	372. DATE OF RETIREMENT
373. DATE OF BIRTH	374. DATE OF GRADE	375. DATE OF TEST	376. DATE OF ENTRY	377. DATE OF DEATH	378. DATE OF RETIREMENT
379. DATE OF BIRTH	380. DATE OF GRADE	381. DATE OF TEST	382. DATE OF ENTRY	383. DATE OF DEATH	384. DATE OF RETIREMENT
385. DATE OF BIRTH	386. DATE OF GRADE	387. DATE OF TEST	388. DATE OF ENTRY	389. DATE OF DEATH	390. DATE OF RETIREMENT
391. DATE OF BIRTH	392. DATE OF GRADE	393. DATE OF TEST	394. DATE OF ENTRY	395. DATE OF DEATH	396. DATE OF RETIREMENT
397. DATE OF BIRTH	398. DATE OF GRADE	399. DATE OF TEST	400. DATE OF ENTRY	401. DATE OF DEATH	402. DATE OF RETIREMENT
403. DATE OF BIRTH	404. DATE OF GRADE	405. DATE OF TEST	406. DATE OF ENTRY	407. DATE OF DEATH	408. DATE OF RETIREMENT
409. DATE OF BIRTH	410. DATE OF GRADE	411. DATE OF TEST	412. DATE OF ENTRY	413. DATE OF DEATH	414. DATE OF RETIREMENT
415. DATE OF BIRTH	416. DATE OF GRADE	417. DATE OF TEST	418. DATE OF ENTRY	419. DATE OF DEATH	420. DATE OF RETIREMENT
421. DATE OF BIRTH	422. DATE OF GRADE	423. DATE OF TEST	424. DATE OF ENTRY	425. DATE OF DEATH	426. DATE OF RETIREMENT
427. DATE OF BIRTH	428. DATE OF GRADE	429. DATE OF TEST	430. DATE OF ENTRY	431. DATE OF DEATH	432. DATE OF RETIREMENT
433. DATE OF BIRTH	434. DATE OF GRADE	435. DATE OF TEST	436. DATE OF ENTRY	437. DATE OF DEATH	438. DATE OF RETIREMENT
439. DATE OF BIRTH	440. DATE OF GRADE	441. DATE OF TEST	442. DATE OF ENTRY	443. DATE OF DEATH	444. DATE OF RETIREMENT
445. DATE OF BIRTH	446. DATE OF GRADE	447. DATE OF TEST	448. DATE OF ENTRY	449. DATE OF DEATH	450. DATE OF RETIREMENT
451. DATE OF BIRTH	452. DATE OF GRADE	453. DATE OF TEST	454. DATE OF ENTRY	455. DATE OF DEATH	456. DATE OF RETIREMENT
457. DATE OF BIRTH	458. DATE OF GRADE	459. DATE OF TEST	460. DATE OF ENTRY	461. DATE OF DEATH	462. DATE OF RETIREMENT
463. DATE OF BIRTH	464. DATE OF GRADE	465. DATE OF TEST	466. DATE OF ENTRY	467. DATE OF DEATH	468. DATE OF RETIREMENT
469. DATE OF BIRTH	470. DATE OF GRADE	471. DATE OF TEST	472. DATE OF ENTRY	473. DATE OF DEATH	474. DATE OF RETIREMENT
475. DATE OF BIRTH	476. DATE OF GRADE	477. DATE OF TEST	478. DATE OF ENTRY	479. DATE OF DEATH	480. DATE OF RETIREMENT
481. DATE OF BIRTH	482. DATE OF GRADE	483. DATE OF TEST	484. DATE OF ENTRY	485. DATE OF DEATH	486. DATE OF RETIREMENT
487. DATE OF BIRTH	488. DATE OF GRADE	489. DATE OF TEST	490. DATE OF ENTRY	491. DATE OF DEATH	492. DATE OF RETIREMENT
493. DATE OF BIRTH	494. DATE OF GRADE	495. DATE OF TEST	496. DATE OF ENTRY	497. DATE OF DEATH	498. DATE OF RETIREMENT
499. DATE OF BIRTH	500. DATE OF GRADE	501. DATE OF TEST	502. DATE OF ENTRY	503. DATE OF DEATH	504. DATE OF RETIREMENT
505. DATE OF BIRTH	506. DATE OF GRADE	507. DATE OF TEST	508. DATE OF ENTRY	509. DATE OF DEATH	510. DATE OF RETIREMENT
511. DATE OF BIRTH	512. DATE OF GRADE	513. DATE OF TEST	514. DATE OF ENTRY	515. DATE OF DEATH	516. DATE OF RETIREMENT
517. DATE OF BIRTH	518. DATE OF GRADE	519. DATE OF TEST	520. DATE OF ENTRY	521. DATE OF DEATH	522. DATE OF RETIREMENT
523. DATE OF BIRTH	524. DATE OF GRADE	525. DATE OF TEST	526. DATE OF ENTRY	527. DATE OF DEATH	528. DATE OF RETIREMENT
529. DATE OF BIRTH	530. DATE OF GRADE	531. DATE OF TEST	532. DATE OF ENTRY	533. DATE OF DEATH	534. DATE OF RETIREMENT
535. DATE OF BIRTH	536. DATE OF GRADE	537. DATE OF TEST	538. DATE OF ENTRY	539. DATE OF DEATH	540. DATE OF RETIREMENT
541. DATE OF BIRTH	542. DATE OF GRADE	543. DATE OF TEST	544. DATE OF ENTRY	545. DATE OF DEATH	546. DATE OF RETIREMENT
547. DATE OF BIRTH	548. DATE OF GRADE	549. DATE OF TEST	550. DATE OF ENTRY	551. DATE OF DEATH	552. DATE OF RETIREMENT
553. DATE OF BIRTH	554. DATE OF GRADE	555. DATE OF TEST	556. DATE OF ENTRY	557. DATE OF DEATH	558. DATE OF RETIREMENT

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 21 August 1973	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)					
3. NATURE OF PERSONNEL ACTION TRANSFER TO VOLUNTARY FUNDS. REASSIGNMENT AND DELEGATION OF N.S.C.A.				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 16 73		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS XX 0 TO V		7. PAN AND MOSA 4230 0121 0002		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDO/CCS OFFICE OF THE CHIEF RECORDS MANAGEMENT AND REGISTRY SEC				10. LOCATION OF OFFICIAL STATION WASH., D.C.			
11. POSITION TITLE RECORDS ADMIN OF CH				12. POSITION NUMBER 0061		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0344.01		16. GRADE AND STEP 11 6		17. SALARY OR RATE 16,326	
18. REMARKS HOME BASE: SS CONCUR: (TELECOORD) C/EUR/PERS CONCUR: (TELECOORD) DDP/RECORDS MGMT OFFICER * CONCUR FOR CIA W-2: CCS/OCB/S							
DATE SIGNED 8/24/73				10B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED	
FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 16	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 39/00/CCS	22. STATION CODE 75013	23. INTERALE CODE	24. MOBILE CODE	25. DATE OF BIRTH	26. DATE OF DEATH
27. DATE OF LEL	28. NTE EXPIRES MO DA YR XX/XX/XX	29. SPECIAL REFERENCE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION CONCURRENCE DATA TYPE MO DA YR	33. SECURITY REQ. NO.	34. SER
35. VET. PREFERENCE CODE	36. SERV. COMP. DATE MO DA YR	37. LOBBY COMP. DATE MO DA YR	38. CAREER CATEGORY CODE	39. FEGLI/HEALTH INSURANCE CODE	40. SOCIAL SECURITY NO.		
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS		44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS		
45. POSITION CONTROL CERTIFICATION 8-23-B		46. O.P. APPROVAL *FRJF. EUR 11/1/73		DATE APPROVED 5 Aug 73			

FORM 1-72 1152

USE PREVIOUS EDITION

SECRET

CLASSIFIED BY 01-01-01

EX-10

(4)

CONFIDENTIAL
(When filled in)

NOTE TO PCS RETURNEES

Personnel processing in from a PCS foreign field assignment through Central Processing Branch are required to review the Employee Conduct Handbook and the information for PCS returnees. This information is contained in a notebook provided by the CPB receptionist.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Handbook 20-4, Employee Conduct, dated 9 July 1970 and the information for returnees dated 1 February 1972.

NAME

(Please Print)

Signature

Date

11 Sept 73

CONFIDENTIAL
(When filled in)

Group 1 - Excluded from
automatic downgrading
and declassification.

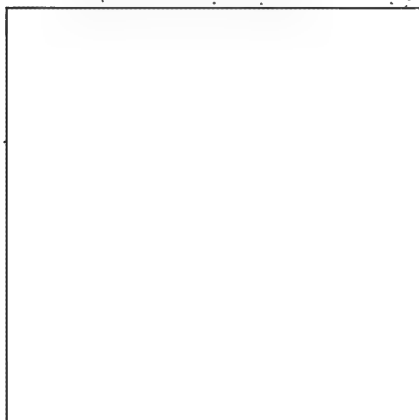
~~SECRET~~

17 APR 1973

Certificate of Exceptional
Service (for Vietnam)



VIETNAM (Contract Employees)



SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 24 January 1973	
1. SERIAL NUMBER		2. NAME (Last-First-Middle) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE REQUESTED MONTH 02 DAY 04 YEAR 73		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V C TO V		V TO C C TO C		7. PAN AND NSCA 3136 1267 0000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/EUROPEAN DIVISION FOREIGN FIELD				10. LOCATION OF OFFICIAL STATION <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			
11. POSITION TITLE RECORDS ADMIN OFFICER (09)				12. POSITION NUMBER 0699		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0344 01		16. GRADE AND STEP 11.6		17. SALARY OR RATE \$16326	
18. REMARKS <div style="display: flex; justify-content: space-between;"> <div> <p>HOME BASE: IS CONCUR</p> <p>PRA HR 20-17e (1) (a) PROMOTION</p> <p>CONCUR: C/E/EE</p> </div> <div style="border: 1px solid black; padding: 5px; width: 60%;"> <p><i>the original to DDP/OS/RMU personnel 0061.mil</i></p> </div> </div>							
<div style="display: flex; justify-content: space-between;"> <div> <p>DATE SIGNED 1/24/73</p> <p>C/E/PERS</p> </div> <div> <p>18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER</p> <p><div style="border: 1px solid black; height: 20px; width: 100%;"></div></p> </div> </div>				<p>DATE SIGNED 2/2/73</p>			
SPACE BELOW FOR EXCLUSIVE USE							
19. ACTION CODE 33		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC 44750 ALPHABETIC EUR		22. STATION CODE 36533	
23. INTEGRITY CODE 3		24. DATE OF BIRTH MO. 02 DA. 04 YR. 73		25. DATE OF GRADE MO. 02 DA. 04 YR. 73		26. DATE OF LEL MO. 02 DA. 04 YR. 73	
27. SPECIAL REFERENCE 81		28. RETIREMENT DATA CODE		29. SEPARATION DATA CODE		30. CORRECTION/CANCELLATION DATA TYPE	
31. VET PREFERENCE CODE		32. SEPT COMP DATE MO. DA. YR.		33. LONG COMP DATE MO. DA. YR.		34. CAREER CATEGORY LAF/RESP PROG/TEMP	
35. FEDERAL TAX DATA FORM EXECUTED 1-YES 2-NO		36. STATE TAX DATA FORM EXECUTED 1-YES 2-NO		37. SOCIAL SECURITY NO.		38. SECURITY REQ. NO.	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE				42. LEAVE CAT. CODE			
43. POSITION CONTROL CERTIFICATION 2-2-73 <i>gmm</i>				44. OP APPROVAL <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			
DATE APPROVED 2/2/73							

FORM 1152 USE PREVIOUS EDITION
6-72

SECRET

FEB 1973

E-2, IMPDET CL. BY:

(4)

☐ UNCLASSIFIED☐ INTERNAL
USE ONLY☐ CONFIDENTIAL☐ SECRET

ROUTING AND RECORD SHEET

SUBJECT: (Optional)

FROM:

EUR/PERS
4B0002 Hqs

EXTENSION

NO.

DATE

TO: (Officer designation, room number, and building)

DATE

RECEIVED

FORWARDED

OFFICER'S
INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across columns after each comment.)

1.

E/PERS/TEDDY

2.

C/E/PERS

3.

C/E/RR I

4.

E/PERS/JON

5.

C/IS/PERS

6.

7.

CSPS/SOB GG10

8.

9.

OP/PI 5E03

10.

11.

12.

13.

14.

15.

for concurrence

for concurrence

7. Subject will be assigned as
Ch. Rep. + RMO DDP/CCS upon
his return to the (1st
Aug 73), vice [redacted]

[redacted] will be assigned
to CCS/RMO position
0061 vice [redacted]
[redacted]

FORM
3-62

610

USE PREVIOUS
EDITIONS☐ SECRET☐ CONFIDENTIAL☐ INTERNAL
USE ONLY☐ UNCLASSIFIED

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
				15 MARCH 1971	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 65 30 71		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS	V TO V	X	V TO C	7. FINANCIAL ANALYSIS NO CHARGEABLE	8. LEGAL AUTHORITY (Completed by Office of Personnel)
	C TO V		C TO C	1136-1267	
9. ORGANIZATIONAL DESIGNATIONS DDP/EUR FOREIGN FIELD SUPPORT BRANCH			10. LOCATION OF OFFICIAL STATION		
11. POSITION TITLE RECORDS ADM OF (09)			12. POSITION NUMBER 0699		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0344.01	16. GRADE AND STEP 10 7	17. SALARY OR RATE \$ 13,821 ✓	
18. REMARKS 1 cc: Payroll From: DDP/EUR DEVELOPMENT COMPLEMENT No Language Required PRA HR 20-17E(1) (B) NTE Two Yrs X HB: EUR					
DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED	
1E/Pers 3/15/71				3/15/71	
PLACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 20	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 44625 51P	22. STATION CODE 36533	23. INTEGRITY CODE 3	24. HOURS CODE 3
25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LIT			
28. NTE EXPIRES MO. DA. YR. 05/29/73	29. SPECIAL REFERENCE MO. DA. YR. 82	30. RETIREMENT DATA MO. DA. YR. 1-YES 2-ORGN 3-TECH 4-NONE	31. SEPARATION DATA CODE TYPE	32. CORRECTION, CANCELLATION DATA MO. DA. YR.	33. SECURITY YES NO
35. VET. PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36. SERV. COMP. DATE MO. DA. YR.	37. LONG. COMP. DATE MO. DA. YR.	38. CAREER CATEGORY CAR. DES. PROV. TEMP. CODE	39. FEGLI/HEALTH INSURANCE CODE 0-WAIVER 1-TIS
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NO OTHER IN SERVICE 2-CLEAR IN SERVICE (LESS THAN 3 YEARS) 3-CLEAR IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED 1-TIS 2-NONE	44. STATE TAX DATA FORM EXECUTED 1-TIS 2-NONE	45. SOCIAL SECURITY NO.
45. POSITION CONTROL CERTIFICATION 5-7-71 P. 1			46. O.P. APPROVAL DATE APPROVED 5-10-71		

FORM 3-67 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

(4)

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

02 DECEMBER 1970

1. SERIAL NUMBER		2. NAME (Last-First-Middle)		3. EFFECTIVE DATE REQUESTED		4. CATEGORY OF EMPLOYMENT	
				MONTH DAY YEAR 12 13 70		REGULAR	
5. REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS				6. FINANCIAL ANALYSIS NO. CHARGEABLE		7. LEGAL AUTHORITY (Completed by Office of Personnel)	
6. FUNDS XX OF TO V. OF TO C.				1236-1186			
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION			
DDP/EUR DEVELOPMENT COMPLEMENT				WASHINGTON, D.C.			
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION	
RECORDS ADM OFFICER				9997		D	
14. CLASSIFICATION SCHEDULE (GS, L, P, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE	
GS		0344.01		10 7		\$ 13,041	
18. REMARKS							
2cc: SECURITY cc: PAYROLL <i>Other</i> HA EUR							
FROM: DDP/EUR/FOREIGN FIELD [] SLOT# 0254							
NTE: 30 June 1971 <i>Pending Reassignment</i>							
Security Approval Granted by Date: 02/04/70 02/10/70							
19. ACTION CODE		20. EMPLOY CODE		DATE SIGNED		100. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
16 18		44947		3 Dec 70		[]	
SPACE BELOW FOR EXCLUSIVE USE							
21. OFFICE CODING		22. STATION CODE		23. INTEGRITY CODE		24. HOURS CODE	
NUMERIC ALPHABETIC		75313					
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEP			
MO. DA. YR.		MO. DA. YR.		MO. DA. YR.			
28. DATE OF GRADE		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE	
MO. DA. YR.		1-ESC 2-OTEN 3-TIC 4-NONE		CODE		TYPE MO. DA. YR.	
32. CORRECTION CANCELLATION DATA		33. SECURITY REQ. NO.		34. SEX			
TYPE MO. DA. YR.		EOD DATA					
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY	
CODE 0-NONE 1-5 PT 2-10 PT		MO. DA. YR.		MO. DA. YR.		CODE CODE U-WAIVER 1-YES	
39. FEGLI/HEALTH INSURANCE		40. SOCIAL SECURITY NO.		41. PREVIOUS CIVILIAN GOVERNMENT SERVICE		42. LEAVE CAT. CODE	
HEALTH INS. CODE				CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		FORM EXECUTED 1-YES 2-NO	
43. FEDERAL TAX DATA		44. STATE TAX DATA		45. POSITION CONTROL CERTIFICATION		46. OP APPROVAL	
CODE NO. TAX EXEMPTIONS 1-YES 2-NO		FORM EXECUTED 1-YES 2-NO		12-8-70 MW		DATE APPROVED 28/70	

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

(4)

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)		20 JANUARY 1971	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS (CORRECTION)				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 1 10 71	
5. FUNDS V TO V XX Q TO V Q TO Q				6. CATEGORY OF EMPLOYMENT REGULAR	
7. FINANCIAL ANALYSIS NO. CHARGEABLE 1234-1186				8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/EUR DEVELOPMENT COMPLEMENT				10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.	
11. POSITION TITLE RECORDS ADM OFFICER				12. POSITION NUMBER 9997	
13. CAREER SERVICE DESIGNATION D				14. CLASSIFICATION SCHEDULE (GS, LB, PL, etc.) GS	
15. OCCUPATIONAL SERIES 0344.01				16. GRADE AND STEP 10 7	
17. SALARY OR RATE \$ 13,821				18. REMARKS cc: Payroll TO CORRECT EFFECTIVE DATE TO READ 1/10/71 VICE 12/13/70 Hd: EUR	
DATE SIGNED AC/E/Per 1/21/71		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 1/21/71	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 58	20. EMPLOY CODE 18	21. OFFICE CODING PHONETIC ALPHABETIC 44777 EUR 75013	22. STATION CODE 75013	23. INTEGER CODE 1	24. MOOT CODE 1
25. DATE OF BIRTH MO. DA. YR.	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.	28. DATE EXPIRES MO. DA. YR.	29. SPECIAL REFERENCE 1-YES 2-OTHER 3-OTHER 4-NONE	30. RETIREMENT DATA CODE
31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE MO. DA. YR. 76 12 13 70	33. SECURITY RES. NO.	34. SEX	35. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36. SERV. COMP. DATE MO. DA. YR.
37. LONG COMP. DATE MO. DA. YR.	38. CAREER CATEGORY CODE 0-WAIVER 1-YES	39. FEET/HEALTH INSURANCE CODE 0-WAIVER 1-YES	40. SOCIAL SECURITY NO.	41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NO PRIOR SERVICE 2-DEBAR IN SERVICE (LESS THAN 3 YEARS) 3-DEBAR IN SERVICE (MORE THAN 3 YEARS)	42. LEAVE CAT. CODE
43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1-YES 2-NO	44. STATE TAX DATA FORM EXECUTED CODE NO. TAX STATE CODE 1-YES 2-NO	45. POSITION CONTROL CERTIFICATION 1-26-71	46. OP APPROVAL	DATE APPROVED 1/26/71	

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

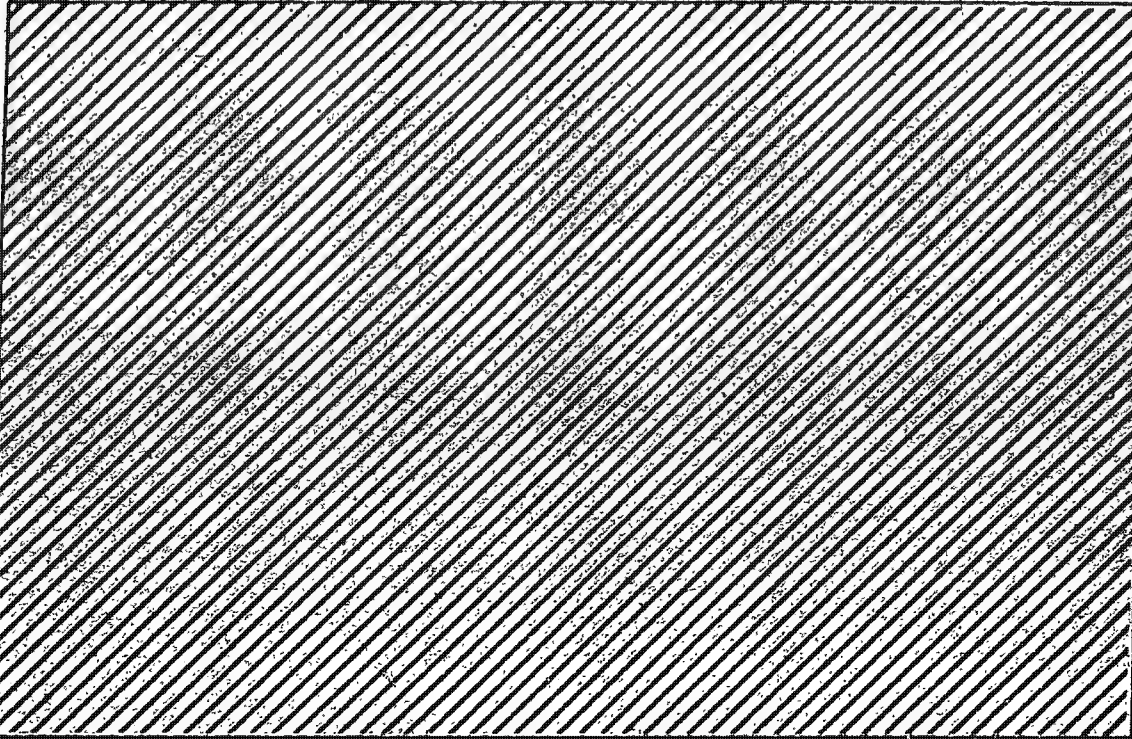

(4)

SECRET

(If box filled in)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER				2. NAME (Last-First-Middle)	
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED	
CHANGE OF FAN				MONTH DAY YEAR 02 12 71	
5. CATEGORY OF EMPLOYMENT				REGULAR	
6. FUNDS				7. FINANCIAL ANALYSIS NO. CHARGEABLE	
XX V TO V CF TO V				1236-1186	
8. LEGAL AUTHORITY (Completed by Office of Personnel)				9. ORGANIZATIONAL DESIGNATION	
DDP/EUR DEVELOPMENT COMPLEMENT				WASHINGTON, D.C.	
10. LOCATION OF OFFICIAL STATION				11. POSITION TITLE	
RECORDS ADM OFFICER				9997	
12. CLASSIFICATION SCHEDULE (GS, LS, etc.)				13. OCCUPATIONAL SERIES	
GS				0344.01	
14. GRADE AND STEP				15. SALARY OR RATE	
10 7				\$ 13,821	
16. REMARKS					
FROM 1234-1186 cc: Payroll K-H-B-EUR					
17. DATE SIGNED		18. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED	
C/E/POX		12 Feb 71		17 Feb 71	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGREE CODE	24. MOBILE CODE
37	18	44997 268	75013		
25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEL	28. SECURITY REG. NO.	29. SEX	
30. WTE EMPLOY	31. SPECIAL REFERENCE	32. RETIREMENT DATA	33. SEPARATION DATA CODE	34. CORRECTION/CANCELLATION DATA	35. SOCIAL SECURITY NO.
36. VTE PREFERENCE	37. SERV. COMP. DATE	38. LONG COMP. DATE	39. CAREER CATEGORY	40. FEGLI/HEALTH PREFERENCE	41. SOCIAL SECURITY NO.
42. PREVIOUS CIVILIAN GOVERNMENT SERVICE	43. LEAVE CAT CODE	44. FEDERAL TAX DATA	45. STATE TAX DATA	46. SOCIAL SECURITY NO.	47. SEX
48. POSITION CONTROL CERTIFICATION	49. DATE APPROVED				
2-18-71 km	2-18-71				

SECRET
(When Filled In)

		
NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
	SELF	70-0961
<p>There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>6 MAY 1970</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF RSD REPRESENTATIVE	
19 JUNE 1970	/s/ 	
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

SECRET

14 May 1968

approved

MEMORANDUM FOR: FE Career Management Committee

SUBJECT: Recommendation for Promotion for [redacted]
from GS-09 to GS-10

1. FE Vietnam Operations concurs in the field recommendation for the promotion of [redacted] from GS-09 to GS-10. Following is the recommendation from the Chief, Operational Services Branch, Vietnam Station.

"Subject has been with the Organization since April 1952 and has served at Vietnam Station as Chief, RI since January 1967. Subject was last promoted in 1958.

"As Chief, RI at Vietnam Station, Subject is responsible for the supervision of eleven personnel engaged in highly diversified activities, all subject to tight scheduling and deadlines. Examples of some of the diversified activities for which Subject is responsible are courier service throughout Vietnam, cable secretariat functions and intelligence reports reproduction and distribution, in addition to the classic registry functions normally performed by a station registry.

"Subject has energetically applied himself to improving procedures within his Section and to the cross-training of employees under his supervision to provide flexibility in his operations. His efforts in these areas bore welcome fruit during the recent disturbances when his Section was placed on twenty-four (24) hour duty for several weeks. During this period, while operating with a reduced staff and an ever-increasing workload, Subject kept all services operationally effective and on a timely basis with the exception of the in-country courier runs which were interrupted for a few days by circumstances beyond his control.

"Subject is a dedicated, conscientious and loyal employee. He is cooperative, exercises initiative in accomplishing the tasks at hand and responds favorably to constructive criticism. Personnel in his section perform their duties in a friendly, courteous and efficient manner. Their attitude, which is an expression of the direction received, has been brought to the attention of the writer on numerous occasions by various Station personnel.

SECRET

SECRET

2

"Subject is an acknowledged expert in his chosen field. He constantly seeks out new methods, equipment and knowledge pertaining to his profession and is furthering himself academically through attendance at the local University extension. He has the background and drive to provide potential for assumption of more senior positions in his field. In view of Subject's strong performance, extensive overseas experience in a variety of situations and length of time in his present grade he is strongly recommended for promotion to the GS-10 level."

2. If promoted, Subject will occupy the position of IO General, GS-11, Slot # 4984.


Chief, Vietnam Operations

SECRET

SECRET

RECEIVED
U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D.C. 20535

SUBJECT : Recommendation for Promotion -

4. Subject is a dedicated, conscientious and loyal employee. He is cooperative, exercises initiative in accomplishing the tasks at hand and responds favorably to constructive criticism. Personnel in his Section perform their duties in a friendly, courteous and efficient manner. Their attitude, which is an expression of the direction received, has been brought to the attention of the writer on numerous occasions by various Station personnel.

S E C R E T

- 2 -

5. Subject is an acknowledged expert in his chosen field. He constantly seeks out new methods, equipment and knowledge pertaining to his profession and is furthering himself academically through attendance at the local University extension. He has the background and drive to provide potential for assumption of more senior positions in his field. In view of Subject's strong performance, extensive overseas experience in a variety of situations and length of time in his present grade he is strongly recommended for promotion to the GS-10 level.

/s/

Chief, OSB

CONCUR

Acting Deputy Chief of Station

APPROVE:

Chief of Station

S E C R E T

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)								8 Oct 1968	
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						11/1/68		REGULAR			
6. AIDS		V TO V		V TO O		7. FINANCIAL ANALYSIS NO. CHARGEABLE		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
		O TO V		XX O TO O		9136 1214					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DIP/EUR FOREIGN FIELD											
SUPPORT BRANCH											
REGISTRY SECTION											
11. POSITION TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
RECORDS AID OF (09)						0254		D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GR				0344.01		10 6		\$ 10,847			
18. REMARKS											
<p>CONCUR: [] FE/Pers</p> <p>By Phone</p> <p>25% Attached</p> <p>PRA 20-F1-D(1/2)(B)</p> <p>NIE 2VA</p> <p>via []</p>											
19. []				DATE SIGNED		20. []		DATE SIGNED		21. []	
C/E/Pers				7 Oct 68				22 OCT 1968			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
22. ACTION CODE		23. EMPLOY CODE		24. OFFICE CODING		25. STATION CODE		26. HOURS CODE		27. DATE OF BIRTH	
37 10		44525		EUR		21025		3			
28. EYE EXPOSURE		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. EOD DATA	
110370		53									
34. VET PREFERENCE		35. SERV. COMP. DATE		36. LONG COMP. DATE		37. CAREER CATEGORY		38. FEGLI/HEALTH INSURANCE		39. UNION SECURITY NO.	
40. PREVIOUS CIVILIAN GOVERNMENT SERVICE				41. LEAVE CAT. CODE		42. FEDERAL TAX DATA		43. STATE TAX DATA		44. []	
45. POSITION CONTROL CERTIFICATION						46. APPROVAL		47. DATE APPROVED			
10 28 68											
From FE											

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)				23 July 1968	
3. PURPOSE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT	
PROMOTION				MONTH DAY YEAR 07 28 68		REGULAR	
6. FUNDS		7. FINANCIAL ANALYSIS NO. CHARGEABLE		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
V TO V U TO V X TO O		9137 1487					
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION			
DEP/FE FOREIGN FIELD FE/VBO - VIET NAM STATION INTELLIGENCE DIVISION COLLATION BRANCH CURRENT INTELLIGENCE SECTION BIOGRAPHIC UNIT				SAIGON, South Vietnam.			
11. RECORDS ADMIN OF				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION	
D 11				4084		D	
14. CLASSIFICATION SYMBOL (GS, I.D., etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE	
OS		0344.01		10.6		\$ 10847	
18. REMARKS							
RECORDS ADMIN OFFICER OCCUPYING 10 GENERAL POSITION.							
19A. [Signature]		DATE SIGNED		19. [Signature]		DATE SIGNED	
CPE/PERSONNEL		23 July 68				21	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
22. ACTION CODE		23. EMPLOY CODE		24. HOURS CODE		25. DATE OF BIRTH	
22 10		23 10		24 3		25	
26. DATE OF GRADE		27. DATE OF LEP		28. SECURITY		29. SEA	
MO. DA. YR.		MO. DA. YR.		MO. DA. YR.		MO. DA. YR.	
30. SPECIAL REFERENCE		31. RETIREMENT DATA		32. SEPARATION DATA CODE		33. CORRECTION CANCELLATION DATA	
MO. DA. YR.		MO. DA. YR.		MO. DA. YR.		MO. DA. YR.	
34. VET PREFERENCE		35. SERV COMP DATE		36. LEAVE COMP DATE		37. CAREER CATEGORY	
CODE		MO. DA. YR.		MO. DA. YR.		CODE	
38. PERIODS OVER AN GOVERNMENT SERVICE		39. LEAVE LAP CODE		40. FEDERAL TAX DATA		41. STATE TAX DATA	
CODE		CODE		CODE		CODE	
42. POSITION CONTROL CERTIFICATION		43. OF		44. DATE APPROVED			
				25/10/68			

FORM 1152 1-67 PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 17 NOVEMBER	
1. SERIAL NUMBER 16 NAME (Last-First-Middle) [REDACTED]					
2. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH 12 DAY 1 YEAR 66		3. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V <input type="checkbox"/> V TO O <input type="checkbox"/> O TO V <input type="checkbox"/> X O TO O <input type="checkbox"/>			7. FINANCIAL ANALYSIS NO. CHARGEABLE 7137-1487		8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DDP/FE/FOREIGN FIELD FE/VNC - VIETNAM STATION			10. LOCATION OF OFFICIAL STATION EAIGON, SOUTH VIETNAM		
11. POSITION TITLE RECORDS ADMIN OF [REDACTED] (11)			12. POSITION NUMBER 4127		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (G.S. I.R. no.) GS		15. OCCUPATIONAL SERIES 0344.01	16. GRADE AND STEP 09/A 7		17. SALARY OR RATE \$ 0001-9262 ✓
18. REMARKS FROM: [REDACTED] / OFFICE OF THE CHIEF/ CENTRAL REGISTRY AND RECORDS SECTION					
19. ACTION CODE 34 10		20. EMPLOY CODE 45500 FE		21. STATION CODE 71265	
22. INTERFER CODE 5		23. DATE OF BIRTH [REDACTED]		24. DATE OF CREDE MO. DA. YR.	
25. DATE EXPIRES MO. DA. YR.		26. SPECIAL REFERENCE 1-EX 2-PLA 3-NONE		27. DATE OF CREDE MO. DA. YR.	
28. VET PREFERENCE CODE 0-NONE 1-1 PT 2-10 PT		29. SERV COMP DATE MO. DA. YR.		30. LONG COMP DATE MO. DA. YR.	
31. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NONE 2-BRIEF IN SERVICE (LESS THAN 3 YEARS) 3-BRIEF IN SERVICE (MORE THAN 3 YEARS)		32. STATE CAT CODE		33. FEDERAL TAX DATA CODE 0-NONE 1-YES 2-NO	
34. POSITION CONTROL CERTIFICATION 170766N		35. DATE APPROVED 14/1/66		36. DATE APPROVED 14/1/66	

152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

SECRET

(When filled in)

F-14

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER				18 Nov 66	
2. NAME (Last-First-Middle)					
3. NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 12 18 66	
5. CATEGORY OF EMPLOYMENT REGULAR				6. LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 Sect. 203	
7. FUNDS		8. FINANCIAL ANALYSIS NO CHARGEABLE		9. ORGANIZATIONAL DESIGNATION	
V TO V CP TO V		V TO CP CP TO CP		10. LOCATION OF OFFICIAL STATION	
X		CP TO CP		DDP/FE	
11. POSITION TITLE		12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, E.B., etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP 9	
17. SALARY OF RATE		18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.			
19A. SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
DATE SIGNED					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INTEREST CODE	24. RIGHTS CODE
25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LST MO DA YR	28. SECURITY RIG NO	29. LST	
30. RETIREMENT DATA 1-CH 2-THIR 3-NONE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	33. SOCIAL SECURITY NO	34. LST	
35. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36. LEAVE COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CODE 0-NONE 1-10 2-10	39. HEALTH INSURANCE CODE 0-NONE 1-10 2-10	40. SOCIAL SECURITY NO
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NO 2-YES (1-10) 3-YES (11-20)	42. LEAVE EXT CODE	43. FEDERAL TAX DATA FORM EXEMPTED CODE 1-YES 2-NO	44. STATE TAX DATA FORM EXEMPTED CODE 1-YES 2-NO	45. POSITION CONTROL CERTIFICATION	46. OP APPROVAL
45. POSITION CONTROL CERTIFICATION 11-21-66 N	46. OP APPROVAL See memo signed by D/Pers dated 16 Nov 66	47. DATE APPROVED			

MEMORANDUM FOR: FE Career Management Committee
SUBJECT: Recommendation for Promotion
[redacted]
from GS-09 to GS-10

2. In the promoter's recommendation for his [redacted] 9 November 1964.
the [redacted] for commended on [redacted] as follows:

"3. The Facility is presently composed of six employees in addition to Mr. Woods who is Chief of this Job. [redacted] does a exemplary job of supervising these employees with the result that FACILITY Program is a smooth and well-⁶ functioning unit."

Excluded from automatic
downgrading and
declassification

25:22-24

"C. In addition to his normal duties, [] is constantly thinking of ways to improve the efficiency of the Station's activity and to be of greater assistance to the Station as a whole. Several of his ideas have been adopted by the Station with a resulting increase in effectiveness. His positive approach to all problems and his cheerfulness and willingness to perform any task have benefited both the Station and the Agency.

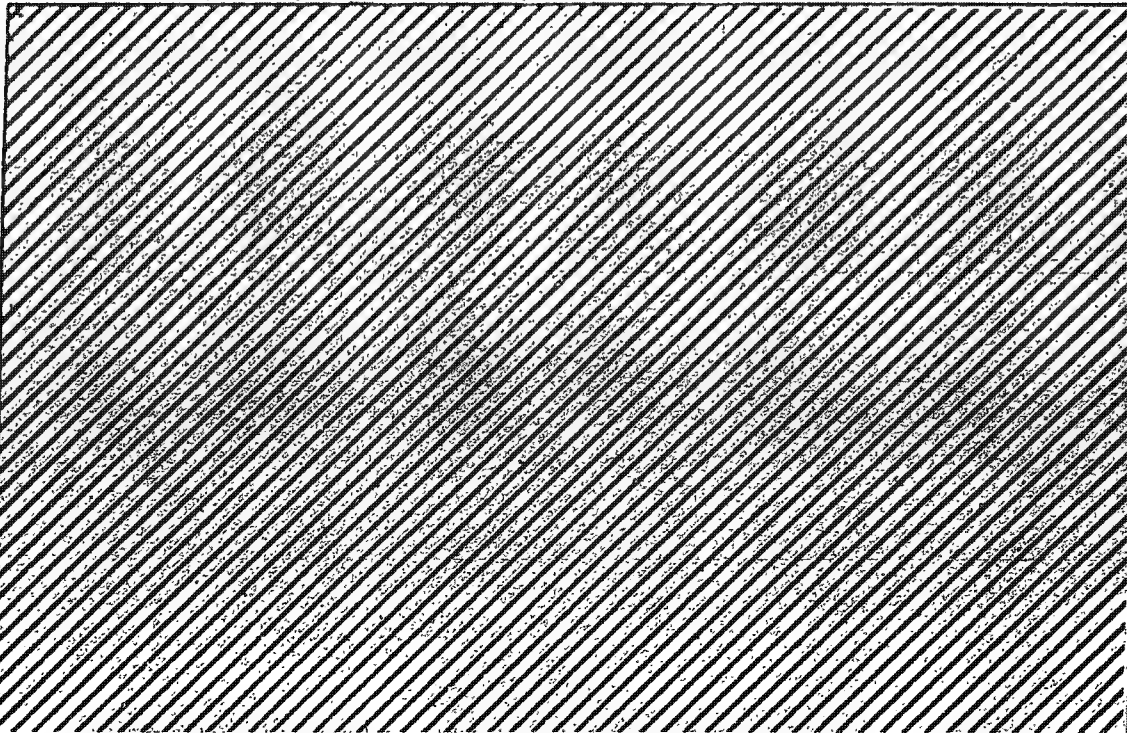
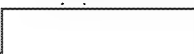
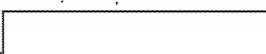
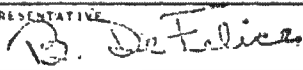
"D. In view of [] demonstrated ability to provide leadership to the Station Regulars unit, his positive approach to the solution of the many problems which daily beset this unit, it is strongly recommended that he be promoted from GS-09 to GS-10 at the earliest opportunity."

6. [] has continued to perform in an over-all "strong" manner as indicated in his recent "check" report. He recently planned and effectively implemented the move of the Table Bar Refectory from one location to another. In a dispatch, dated 22 November, 1965, the present Chief of Messes [] stated: "There is little to add to my predecessor's commendation letter, dated 8 November 1964, for the good work of []. He is performing his duties as Chief of the Table Bar Refectory with efficiency and dispatch. He is a strong supervisor who maintains discipline where the distinction between the duties of his personnel and his own is not clear."

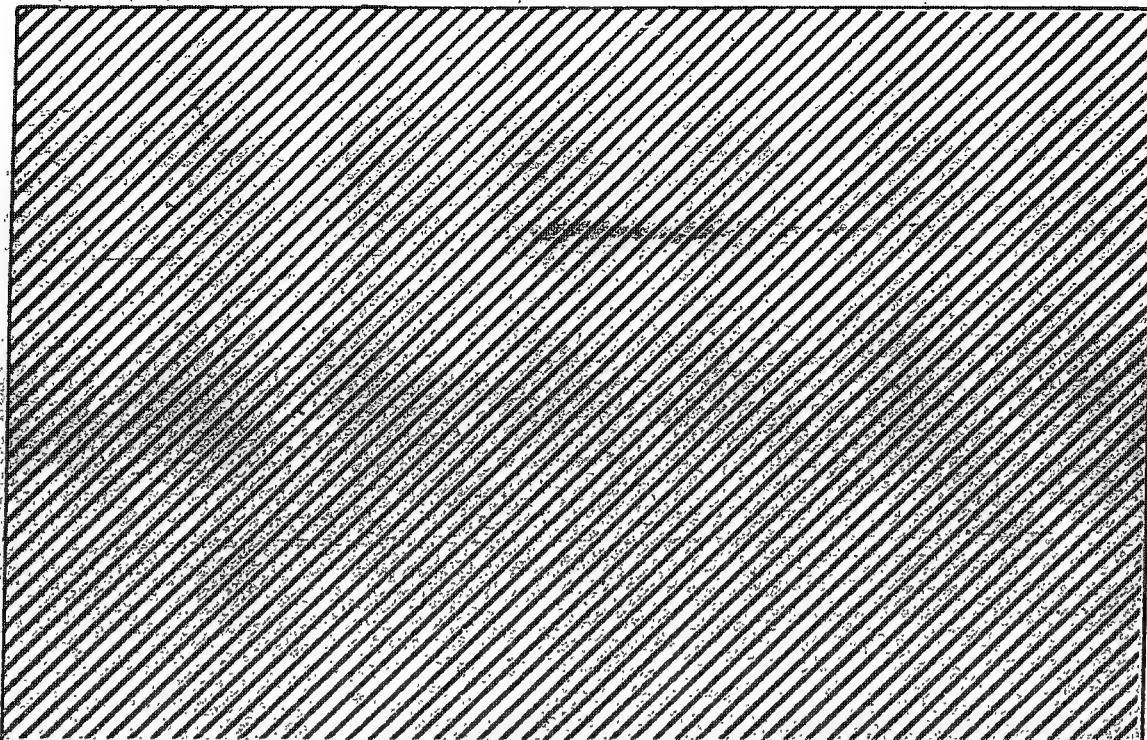
[illegible]

641 25125

SECRET
(When Filled In)

		
NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
		66-502
<p>There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>26 October 1965</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE 17 DEC 1965	SIGNATURE OF BSD REPRESENTATIVE 	
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

SECRET
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle) <input type="text"/>	NAME AND RELATIONSHIP OF DEPENDENT* <input type="text"/>	CLAIM NUMBER 66-148
--	---	------------------------

There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 26 June 1965.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE 17 AUG 1965	SIGNATURE OF BSD REPRESENTATIVE <i>B. De Felice</i>
-------------------------------	--

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 10 Feb 1961	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)					
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT	
Reassignment and Transfer to Confidential funds 03 19 61				MONTH DAY YEAR		Regular	
6. FUNDS		7. COST CENTER NO. CHARGE		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
<input checked="" type="checkbox"/> V TO V <input type="checkbox"/> V TO CF <input type="checkbox"/> CF TO V <input type="checkbox"/> CF TO CF		1137-7351-1000					
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION			
DDP/FE							
Office of the Chief Central Registry and Records Section							
11. POSITION TITLE		12. POSITION NUMBER		13A. PCR CONTROL NO.		13. CAREER SERVICE DESIGNATION	
Intel Analyst - Gen		3061				D	
14. CLASSIFICATION SCHEDULE (GS, LP, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE	
GS		0132.36		09 3		\$ 6765	
18. REMARKS							
FROM: FE/Office of the Chief/2461 Tray 1 lcc - Security Form 259 forwarded to Medical Staff Departure Date: 31 March 1961 FE/CMC Approved Security Approval: [Signature] 2/16/61 [Signature] 3/14/61							
19. SIGNATURE OF REQUESTING OFFICER				20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			
[Signature]				[Signature]			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. ACTION CODE	22. EMPLOY CODE	23. OFFICE CODE	24. STATION CODE	25. INTERVIEW CODE	26. MONTH CODE	27. DATE OF BIRTH	28. DATE OF CHARGE
15	11	5130	12	3			
29. DATE EXPIRES	30. DATE OF REFERENCE	31. SECURITY DATA	32. DISPOSITION/ANCELLATION DATA	33. SECURITY REQ. NO.		34. SEC	
				EOD DATA			
35. VET. PREFERENCE	36. SERV. COMP. DATE	37. LONG. COMP. DATE	38. MIL SERV. CODE	39. PERM. / HEB. / AS. PANCE	40. SOCIAL SECURITY NO.		
0 - NONE 1 - 5 PT. 2 - 10 PT.			1 - YES 2 - NO				
41. PREVIOUS GOVERNMENT SERVICE DATA	42. MILITARY LIT. CODE	43. VETERAN DATA	44. STATE TAX DATA				
0 - NO PREVIOUS SERVICE 1 - NO BARR IN SERVICE 2 - BARR IN SERVICE LESS THAN 12 MONTHS 3 - BARR IN SERVICE MORE THAN 12 MONTHS							
45. POSITION CONTROL CERTIFICATION				46. O.P.S. APPROVAL			
03/13/61							

S-E-C-R-E-T

MEMORANDUM FOR:

VIA : Chief, FE

1. The problem of effective management of the operational records of the Clandestine Services is one of our most important responsibilities. In this connection, you have been selected by your Division, and authorized by the Clandestine Services Records Committee, to act as Records Officer for your component. Your selection is based on your professional qualifications to carry out an assignment requiring experience, judgment, and a knowledge of the objectives of the Clandestine Services. A copy of this memorandum will be placed in your official personnel folder to record your appointment as Records Officer.

2. You are to act on behalf of your Division or Staff element in authorizing the destruction of material of no value to the Clandestine Services in accordance with criteria established for this purpose. You are empowered to authorize the destruction of documents and index cards recommended for destruction by other members of your Branch, and to desensitize KAPOK and RYBAT material which is no longer sensitive or which has been restricted in error. Your signature will be recognized by RID as that of an officially appointed Records Officer.

3. At the meeting of 16 December 1958, you were briefed on the details of your duties as Records Officer. It is now considered that you will be able fully to execute your duties as Records Officer and thus make a real contribution to the CS Records Management Program.

DDP/RMO

cc: Personnel Jacket of Addressee

S-E-C-R-E-T

SECRET

REQUEST FOR PERSONNEL ACTION

1. Serial No.		2. Name (Last-First-Middle)		3. Date Of Birth		4. Vet. Prof.		5. Sex		6. CS - EOB			
						None-0 5 Pt-1 10 Pt-2		Code 1 M 1		Mo. Da. Yr. 04 21 52			
7. SCD		8. CSC Name		9. CSC Or Other Legal Authority		10. Apmt. Affidav.		11. FEGLI		12. LCD		13. Other	
Mo. Da. Yr.		Yes-1 No-2		Code		Mo. Da. Yr.		Yes-1 No-2		Code		Mo. Da. Yr.	
11 12 48		No-2		1 50 USCA 403 J				No-2 /		04 21 52		No-2 2	

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP FE FE/ SUPPORT BRANCH				5161						51557	
16. Dept. - Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dept. - USIA - Frign. -		Code		5 RECDs MGMT ANAL		3382		GS		0306.01	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.	
09 1		\$ 5985		01		11 16 58		11 15 59		9 3780 55 006	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
Reassignment		01		Mo. Da. Yr.		Regular		01			
Vouchered				3 22 59							

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP/FE Office of the Chief Secretariat				5112		Washington, D. C.				25013	
33. Dept. - Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dept. - USIA - Frign. -		Code		RECDs MGMT OF		2461 58-11					
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.	
										9 3700 20 001	

SOURCE OF REQUEST

A. Requested By		B. Recommended By		C. Recommended By (And Title)	
Mozelle Little		E/Secretariat		Personnel	
D. For		E. For		F. For	
X2957					

CLEARANCES

Clearance		Signature		Date		Clearance		Signature		Date	
A. Career Board				3-12-59		D. Placement					
B. Pos. Control		23				E.					
C. Classification						F. Approved By					

Remarks

please transfer from Unvouchered to Vouchered funds
2 Copies to Security

4/6 file

SECRET

SECRET

REQUEST FOR PERSONNEL ACTION

6 October 1958

1. Serial No.		2. Name (Last-First-Middle)			3. Date Of Birth			4. Vol. Prof.		5. Sex		6. CS - LOD		
					Mo. Da. Yr.			None-0 5 Pt-1 10 Pt-2		Code 1 M 1		Mo. Da. Yr. 04 21 52		
7. SCD		8. CSC Reim.		9. CSC Or Other Legal Authority		10. Appt. Affidav.			11. FEGLI		12. LCD		13. Ill. Serv. Code	
Mo. Da. Yr. XX XX XX		Yes-1 No-2 1		Code 1		50 USCA 403			Mo. Da. Yr. Mo. Da. Yr.		Yes-1 No-2 04 21 52		Yes-1 No-2 2	

PREVIOUS ASSIGNMENT

14. Organizational Designation		Code		15. Location Of Official Station		Station Code	
DDP FE BRANCH 3							
ADMIN. SEC		5161				57557	
16. Dept. Field		17. Position Title		18. Position No.		19. Serv.	
Dept. Code US/Id - Frqn -		RECORDS MGMT ANALYST		3382		GS	
20. Occup. Series						0306.01	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade	
07 A 4		\$ 4799		DI		Mo. Da. Yr. 04 11 55	
25. PSI Due		26. Appropriation Number				27. 3780 55 006	
Mo. Da. Yr. 04 11 55		Mo. Da. Yr. 04 11 55					

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
Promotion		30		11/16/58		Regular		01			

PRESENT ASSIGNMENT

31. Organizational Designation		Code		32. Location Of Official Station		Station Code	
DDP/FE FE/PSH - Support Branch							
33. Dept. Field		34. Position Title		35. Position No.		36. Serv.	
Dept. Code US/Id - Frqn -				37. Occup. Series			
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade	
9 1		\$ 5595				Mo. Da. Yr. 11/16/58	
42. PSI Due		43. Appropriation Number				9-3780-55-006	
Mo. Da. Yr. 11/16/58		Mo. Da. Yr. 11/16/58					

SOURCE OF REQUEST

A. Requester (Name & Telephone Ext.)		B. Request Approved By (Signature And Title)	
Monselle L. L. L. 11/16/58		[Signature]	

CLEARANCES

Clearance		Date		Clearance		Signature		Date	
A. Career Board		11/13/58		D. Placement					
B. Pos. Control		11/13/58		E.					
C. Classification		11/13/58		F. Approved By		[Signature]		11/14/58	

Remarks: Request for promotion to GS-9 submitted to Wage & Salary Division.
(Hold promotion in Career Panel until slot approved.)

Stinley
COPY

AIR

1024-A-9355
(50-1-5)

Chief, WH Division
ATTN : Chief, RI
Chief of Station

31 January 1958

Administrative

EDY Service - RI Team

ACTION REQUIRED: Routing copies to Personnel files of employees concerned

wishes to make it a matter of record that the RI employees listed above served efficiently and well and were a fine addition to this station during their service here.

2. wishes to acknowledge at this time, not only the exemplary service rendered by these employees but also the splendid support that RI Division has given to this station.

3. The RI employees named in paragraph 1 worked hard (expending many hours more than the forty normal work hours each week) and efficiently on Station files. In addition, they were congenial, friendly and a pleasure to have in the Station.

ACV/cps

29 January 1958

Distribution:

8 - Hqs.
2 - Files

STANDARD FORM 52 PREPARED BY THE U. S. CIVIL SERVICE COMMISSION WASHINGTON - FEDERAL PERSONNEL MANUAL CHAPTER IV		UNVOUCHERED	
REQUEST FOR PERSONNEL ACTION			
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 68 and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)		2. DATE OF BIRTH	
[Redacted]		[Redacted]	
3. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment <i>Transfer to V funds</i>		4. EFFECTIVE DATE A. PROPOSED 5/1/57 B. APPROVED 5 Sept 57	
5. POSITION (Specify whether establish, change grade or title, etc.)		6. C. S. OR OTHER LEGAL AUTHORITY	
[Redacted]		[Redacted]	
7. FROM: Intel Analyst BV-430.12 4795 GS-0132.35-7 \$4,600.00 p/a DDP/PI Records Integration Division Analysis & Operations Branch Analysis Section Washington, D.C.		8. POSITION TITLE AND NUMBER Intel Analyst Records & Operations 4795 GS-0132.35-7 \$4,600.00 p/a DDP/PI Branch 3 - Administration Section	
9. SERVICE, GRADE, AND SALARY		10. ORGANIZATIONAL DESIGNATIONS	
[Redacted]		[Redacted]	
11. HEADQUARTERS		12. FIELD OR DEPARTMENTAL	
[Redacted]		[Redacted]	
A. REMARKS (Use reverse if necessary) * Memo dtd 18 June 1957 to Mgm staff via SSA/DD/S requesting that three RI Positions (1 GS-9 and 2 GS-7n - Record Analyst) be established on the [Redacted] to be slotted against the GS-9 slot. Phone call EW/PT/III x 4009 for effective date. [Redacted] Concur & Ftr. Rep. Chm [Redacted] 20			
B. [Redacted]		D. REQUEST APPROVED BY [Redacted]	
C. [Redacted] (Name and telephone extension) x 2957		E. [Redacted]	
13. VETERAN PREFERENCE NONE WWII OTHER SPT. 10 POINT DISAB. OTHER X		14. POSITION CLASSIFICATION ACTION NEW VICE I.A. REAL SD:DI	
15. SEX M.		16. APPROPRIATION FROM 8-2309-23 TO: 8-3780-55-006 57553	
17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) YES		18. DATE OF APPOINTMENT AFFIDAVIT (ADDITIONAL ONLY)	
19. LEGAL RESIDENCE [Redacted] CLAIMED [Redacted] PROVED STATE:		20. STANDARD FORM 50 REMARKS Do C 04.10.55. PSI - 04.06.58 No Cl W	
21. CLEARANCES		INITIAL OR SIGNATURE	
A.		[Redacted]	
B. CEN. OR POS. CONTROL		[Redacted]	
C. CLASSIFICATION		[Redacted]	
D. PLACEMENT OR ENPL		[Redacted]	
E.		[Redacted]	
F. APPROVED BY [Redacted] 7/12/57 10-4, Ddt to be forwarded to, payrol 16 August 57			

STANDARD FORM 52 PREPARED BY THE U. S. DEPARTMENT OF DEFENSE GPO: 1954 O - 275-000 (When printed in duplicate, use in duplicate)		VOUCHERED	
REQUEST FOR PERSONNEL ACTION			
REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation date on reverse.			
1. NAME (Mr., Miss, Mrs., One from name, initial(s), and surname) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		2. DATE OF BIRTH <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
3. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		4. EFFECTIVE DATE A. PROPOSED: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
B. POSITION (Specify whether establish, change grade or title, etc.) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		D. APPROVED: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
FROM: BV-430.02		TO: Intel Analyst BV-430.12 GS-0132.35-7 \$4660.00 pa DDP/PI Records Integration Division Analysis & Operations Branch Analysis Section Washington, D.C.	
5. SERVICE, GRADE, AND SALARY 6. ORGANIZATIONAL DESIGNATIONS 7. HEADQUARTERS 8. FIELD OR DEPARTMENTAL <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		9. FIELD OR DEPARTMENTAL <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	
A. REMARKS (Use reverse if necessary) Slot BV-430.02 was used for slotting purposes only--this action will eliminate double slotting.			
B. REQUESTED BY (Name and title) John M. Scott, Chief, R		D. REQUEST APPROVED BY <i>Ch. M. Scott, Jr., RFP</i>	
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) Ruth Robinson, Ext. 2519		Signatures <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
10. VETERAN PREFERENCE NONE <input type="checkbox"/> WW <input type="checkbox"/> OTHER <input type="checkbox"/> 5 PT. <input checked="" type="checkbox"/> 10 PT. <input type="checkbox"/> GRADE <input type="checkbox"/> OTHER <input type="checkbox"/>		11. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/> SD: DI	
12. SEX M <input checked="" type="checkbox"/> F <input type="checkbox"/>		13. DATE OF APPOINTMENT, AFFIDAVIT (Accessions Only) 14. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:	
15. STANDARD FORM 50 REMARKS APPROVED BY FI CAREER SERVICE BOARD DATE <i>16 Aug 56</i>			
16. CLEARANCES A. <input type="checkbox"/> B. <input type="checkbox"/> C. <input type="checkbox"/> D. <input type="checkbox"/> E. <input type="checkbox"/>		INITIAL OR SIGNATURE DATE REMARKS	
B. CEIL OR POS CONTROL <i>K.P.</i>		DATE <i>7/17/56</i>	
C. CLASSIFICATION <i>Secret</i>		DATE <i>17 Aug 56</i>	
D. PLACEMENT OR EXPL. <i>17 Aug 56</i>		DATE <i>17 Aug 56</i>	
E. APPROVED BY <i>Ch. M. Scott, Jr.</i>		DATE <i>16 Aug 56</i>	

STANDARD FORM 52 FORM DATED BY THE U. S. GOVT. PRINTING OFFICE WASHINGTON, D. C. 20540 REQUEST FOR PERSONNEL ACTION		UNVOUCHERED TO VOUCHERED	
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr - Miss - Mrs - One given name, initial(s), and surname): <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		2. DATE OF BIRTH: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
3. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.): Reassignment		4. DATE OF REQUEST: 14 June 1956	
5. POSITION (Specify whether establish, change grade or title, etc.):		6. EFFECTIVE DATE: A. PROPOSED:	
7. C. S. OR OTHER LEGAL AUTHORITY:		8. APPROVED:	
FROM: IO-CI 08-0136-53-7 DDP/FE Branch 1 - Records Integration Branch Personality Files Section		TO: Intel Analyst GS-0196-59-7 DDP/FE Records Integration Division Analysis & Operations Branch Analysis Section Washington, D.C.	
9. POSITION TITLE AND NUMBER: BFP 583.05 \$4660.00		10. SERVICE GRADE AND SALARY: BV-430.02 \$4660.00 pa	
11. ORGANIZATIONAL DESIGNATION: 71-88		12. FIELD OR DEPARTMENTAL: <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	
13. REMARKS (Use reverse if necessary): Transfer from Unvouchered to Vouchered Funds. Vice [redacted] transferring to [redacted] EE. Copies of this action have been submitted to Payroll and Security offices. <div style="text-align: right;">CONCUR: [redacted]</div>			
14. VETERAN PREFERENCE: MORE WWI OTHER SPT 15 POINT DISAB OTHER <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
15. POSITION CLASSIFICATION ACTION: NEW VICE 1 A REAL <div style="text-align: right;">SD: DI</div>			
16. APPROPRIATION: FROM: 6-2740-55-096 TO: 6-2309-23		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO): Yes	
18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY):		19. LEGAL RESIDENCE: <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED	
20. STANDARD FORM 50 REMARKS: <div style="font-family: cursive; font-size: 1.2em;"> 26 June 56 [signature] 27 June 56 [signature] 26/27/56 </div>			
21. CLEARANCES: A. B. CEIL. OR POS. CONTROL: 4/27/56 C. CLASSIFICATION: D. PLACEMENT OR EMPL.: 10/2/56 E.		INITIAL OR SIGNATURE: [signature] DATE: 10/2/56 REMARKS: W-4 made	

SECRET

Name:

Date: 15 June 1956

CS Designation: DI

Nature of Action: Reassignment

FROM

TO

Pos. Title: I. O. (CI)

Intel Analyst

Grade: GS-7

GS-7

Division: DDP/FE

DDP/FE

Staff: Branch 1 -

RI

Branch: Records Integration

Analysis NM & Operations

Section: Personality Files

Analysis

Hqrs:

Washington

I & R Comment

1956

Date

VIA: AIR

SPECIFY AIR OR SEA POUCH

DISPATCH NO. []

CONFIDENTIAL

CLASSIFICATION

4 FEB 1955

TO : Chief, FS

DATE:

FROM : Chief, []

INFC: Chief, Support Mission, []

SUBJECT: GENERAL: Administrative/Personnel

SPECIFIC: Recommendation for Promotion - []

1. It is recommended that [] be promoted from GS-5 to GS-7. Subject entered on duty with the [] 26 July 1954.

2. [] presently occupies proposed Slot No. 21 which has been recommended as a GS-9 slot. Subject has been in grade as a GS-5 since 6 June 1953 and has performed the duties of his present assignment since 10 August 1954.

3. Subject has had approximately two years of experience in the maintenance of agent records. This experience has enabled him not only to assume his present responsibilities with a minimum of supervision, but also to initiate a completely new and improved system for the maintenance of the agent records of the [] Mission. Due partially to the efficiency of the system that he has initiated and partially to the enthusiasm with which he approaches his work, [] has assumed the work load previously handled by two individuals and at the same time has managed to keep his backlog to a minimum.

4. [] is conscientious, hard-working and more than willing to work long hours of overtime without additional compensation in order to maintain his section on a current basis. Subject individual devoted unusually long hours to reestablish himself during the recent move of this Mission to Japan. On the basis of work performance and motivation, subject is recommended as justly deserving of promotion to GS-7.

5. I certify that [] is performing the duties outlined in the job description attached hereto.

/s/ []

1 February 1955

1 ENCL - a/s

DISTRIBUTION:

1 - Chief, FS

1 - Chief, EN

CONFIDENTIAL

CLASSIFICATION

CONFIDENTIAL

POSITION DESCRIPTION -

1. Nature and Purpose of Work:

My position is that of intelligence analyst in the Personality File section of the Records Integration Branch. I am responsible for the maintenance of agent records and personality files.

2. Duties:

a. To maintain all agent records. This takes a good percentage of my time as it includes the following:

b. To maintain the RI card index, assuring that all cards received in RI are properly filed and have the correct names and telecodes.

c. To analyze, card and file all documents forwarded to Personality Files; these include State Station memos, HQ's, Contact Reports, CCHAF Reports, EPIC's, various intelligence summaries, etc.

3. Responsibility for the Work of Others:

N/A

4. Scope and Effect of Work:

I am responsible for making all HQT file checks. I must see that they are made out thoroughly, quickly and accurately. My check may decide the outcome of hiring or refusing to hire a prospective agent or other employee for an operation or project.

5. Supervision and Guidance Received:

I receive no direct supervision or guidance in duties relating to the maintenance of agent records. I receive over-all policy guidance from the Chief of RI and some guidance from branch chiefs and case officers.

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CONFIDENTIAL

- 2 -

6. Mental Demands:

a. Initiative: In order to maintain agent records properly, I must always keep alert for new ways to keep them up-to-date and meet any demands that may be made for drawing up new procedures for the maintenance of agent records.

b. Originality: To adopt new ways of maintaining agent records without losing control over the flow of daily material.

c. Judgment: I must decide what action should be taken on all ☐ file checks, regarding what information is to be sent to Headquarters and ☐.

7. Personal Work Contacts:

I must maintain close personal contact with all case officers and branch chiefs in order that I may maintain up-to-date agent records.

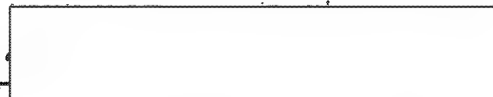
8. Other:

I must maintain files of all documents routed to Personality Files. Also I must resolve problems the branch chiefs or case officers may have in regard to agent records.

Also, I have recently established a 201 agent record system for the Mission and am responsible for its continual maintenance.

CONFIDENTIAL

CHECK LIST FOR TRAINING

A rectangular box with a black border, used to redact information from the document.

1. Typing

3. English Usage

2. Shorthand

4. Office Practice
(Electric typewriter, filing,
phone, Correspondence Manual,
proofreading, office protocol.)

STANDARD FORM 52
FORM 52 OF THE
U. S. CIVIL SERVICE COMMISSION
ADJUSTMENT AND PROMOTION, PERSONNEL
BUREAU, OFFICE OF

REQUEST FOR PERSONNEL ACTION

YOU PLEASED TO
UNVOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Mrs., Miss, One given name, initial(s), and surname)		2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
				16 Feb 54
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)			6. EFFECTIVE DATE A. PROPOSED	7. C. S. OR OTHER LEGAL AUTHORITY
Reassignment				
8. POSITION (Specify whether establish, change grade or title, etc.)			D. APPROVED: Feb 25 1954	
9. POSITION-TITLE AND NUMBER		10. SERVICE, GRADE, AND SALARY		
Intell. Anal. 21-469.08		16(FI) EFF 602.02-5		
GS-0136.51-5, \$3410.00 p.a.		GS-0136.51-5, \$3410.00 p.a.		
DDP/FI		DDP/TE		
Records Integration Staff DIV		Intelligence Division		
Processing & Records Branch		Positive Intelligence Branch		
Consolidation Section		Intelligence Division		
Washington, D.C.		Intelligence Division		
FIELD		FIELD		
DEPARTMENTAL		DEPARTMENTAL		

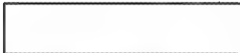
11. REMARKS (Use reverse if necessary)

Transfer to Unvouchered Funds from Vouchered Funds.

12. VETERAN PREFERENCE		13. POSITION CLASSIFICATION ACTION	
NONE	WITH OTHER	NEW	VILL
14. DATE OF APPOINTMENT AFFIDAVIT (Accessions Only)		15. LEGAL RESIDENCE	
FROM: 2300-20		CLAIMED	
TO: 1-3720-55-096		PROVED	
16. STANDARD FORM 50 REMARKS		17. DATE OF APPOINTMENT AFFIDAVIT (Accessions Only)	
Special okay Spec. F.C. & FI 16 Apr 54		18. DATE OF APPOINTMENT AFFIDAVIT (Accessions Only)	
Case. 21-469.08 16 Apr 54		19. DATE OF APPOINTMENT AFFIDAVIT (Accessions Only)	
20. CLEARANCES		21. INITIAL OR SIGNATURE	
A.		B.	
C. CLASSIFICATION		D. PLACEMENT OR EMPL	
E.		F. APPROVED BY	

F. APPROVED BY

STANDARD FORM 52 PREVIOUS EDITIONS BY THE U. S. GOVERNMENT PRINTING OFFICE JANUARY 1950 - PREVIOUS EDITIONS NATIONAL ARCHIVES		REQUEST FOR PERSONNEL ACTION	
REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 68 and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)		2. DATE OF BIRTH	
3. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Promotion		4. DATE OF REQUEST 1 June 1953	
B. POSITION (Specify whether establish, change grade or title, etc.)		5. EFFECTIVE DATE A. PROPOSED:	
		B. APPROVED: 7 June 53	
FROM: Intel. Anal. BV-469.08-4 GS-1332 \$3175.00 pa DDP/PI Records Integration Division STAFF Processing & Records Branch Consolidation Section Washington, D.C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		TO: Intel. Anal. BV-469.08 GS-1332 \$3410.00 pa DDP/PI Records Integration Division STAFF Processing & Records Branch Consolidation Section Washington, D.C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	
6. POSITION TITLE AND NUMBER		7. C. & D. OTHER LEGAL AUTHORITY	
8. SERVICE GRADE AND SALARY			
9. ORGANIZATIONAL DESIGNATION			
10. HEADQUARTERS			
11. FIELD OR DEPARTMENTAL			
12. REMARKS (Use reverse if necessary) Subject has been in grade since 17 Aug 52 21 April 1952.			
13. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)		14. REQUEST	
2510		Signature: 4. FI/PO	
15. VETERAN PREFERENCE		16. POSITION CLASSIFICATION ACTION	
15A. HONK 15B. WHIL 15C. OTHER 15D. 15E. 15F. 15G. 15H. 15I. 15J. 15K. 15L. 15M. 15N. 15O. 15P. 15Q. 15R. 15S. 15T. 15U. 15V. 15W. 15X. 15Y. 15Z. 15AA. 15AB. 15AC. 15AD. 15AE. 15AF. 15AG. 15AH. 15AI. 15AJ. 15AK. 15AL. 15AM. 15AN. 15AO. 15AP. 15AQ. 15AR. 15AS. 15AT. 15AU. 15AV. 15AW. 15AX. 15AY. 15AZ. 15BA. 15BB. 15BC. 15BD. 15BE. 15BF. 15BG. 15BH. 15BI. 15BJ. 15BK. 15BL. 15BM. 15BN. 15BO. 15BP. 15BQ. 15BR. 15BS. 15BT. 15BU. 15BV. 15BW. 15BX. 15BY. 15BZ. 15CA. 15CB. 15CC. 15CD. 15CE. 15CF. 15CG. 15CH. 15CI. 15CJ. 15CK. 15CL. 15CM. 15CN. 15CO. 15CP. 15CQ. 15CR. 15CS. 15CT. 15CU. 15CV. 15CW. 15CX. 15CY. 15CZ. 15DA. 15DB. 15DC. 15DD. 15DE. 15DF. 15DG. 15DH. 15DI. 15DJ. 15DK. 15DL. 15DM. 15DN. 15DO. 15DP. 15DQ. 15DR. 15DS. 15DT. 15DU. 15DV. 15DW. 15DX. 15DY. 15DZ. 15EA. 15EB. 15EC. 15ED. 15EE. 15EF. 15EG. 15EH. 15EI. 15EJ. 15EK. 15EL. 15EM. 15EN. 15EO. 15EP. 15EQ. 15ER. 15ES. 15ET. 15EU. 15EV. 15EW. 15EX. 15EY. 15EZ. 15FA. 15FB. 15FC. 15FD. 15FE. 15FF. 15FG. 15FH. 15FI. 15FJ. 15FK. 15FL. 15FM. 15FN. 15FO. 15FP. 15FQ. 15FR. 15FS. 15FT. 15FU. 15FV. 15FW. 15FX. 15FY. 15FZ. 15GA. 15GB. 15GC. 15GD. 15GE. 15GF. 15GG. 15GH. 15GI. 15GJ. 15GK. 15GL. 15GM. 15GN. 15GO. 15GP. 15GQ. 15GR. 15GS. 15GT. 15GU. 15GV. 15GW. 15GX. 15GY. 15GZ. 15HA. 15HB. 15HC. 15HD. 15HE. 15HF. 15HG. 15HH. 15HI. 15HJ. 15HK. 15HL. 15HM. 15HN. 15HO. 15HP. 15HQ. 15HR. 15HS. 15HT. 15HU. 15HV. 15HW. 15HX. 15HY. 15HZ. 15IA. 15IB. 15IC. 15ID. 15IE. 15IF. 15IG. 15IH. 15II. 15IJ. 15IK. 15IL. 15IM. 15IN. 15IO. 15IP. 15IQ. 15IR. 15IS. 15IT. 15IU. 15IV. 15IW. 15IX. 15IY. 15IZ. 15JA. 15JB. 15JC. 15JD. 15JE. 15JF. 15JG. 15JH. 15JI. 15JJ. 15JK. 15JL. 15JM. 15JN. 15JO. 15JP. 15JQ. 15JR. 15JS. 15JT. 15JU. 15JV. 15JW. 15JX. 15JY. 15JZ. 15KA. 15KB. 15KC. 15KD. 15KE. 15KF. 15KG. 15KH. 15KI. 15KJ. 15KK. 15KL. 15KM. 15KN. 15KO. 15KP. 15KQ. 15KR. 15KS. 15KT. 15KU. 15KV. 15KW. 15KX. 15KY. 15KZ. 15LA. 15LB. 15LC. 15LD. 15LE. 15LF. 15LG. 15LH. 15LI. 15LJ. 15LK. 15LM. 15LN. 15LO. 15LP. 15LQ. 15LR. 15LS. 15LT. 15LU. 15LV. 15LW. 15LX. 15LY. 15LZ. 15MA. 15MB. 15MC. 15MD. 15ME. 15MF. 15MG. 15MH. 15MI. 15MJ. 15MK. 15ML. 15MN. 15MO. 15MP. 15MQ. 15MR. 15MS. 15MT. 15MU. 15MV. 15MW. 15MX. 15MY. 15MZ. 15NA. 15NB. 15NC. 15ND. 15NE. 15NF. 15NG. 15NH. 15NI. 15NJ. 15NK. 15NL. 15NM. 15NO. 15NP. 15NQ. 15NR. 15NS. 15NT. 15NU. 15NV. 15NW. 15NX. 15NY. 15NZ. 15OA. 15OB. 15OC. 15OD. 15OE. 15OF. 15OG. 15OH. 15OI. 15OJ. 15OK. 15OL. 15OM. 15ON. 15OO. 15OP. 15OQ. 15OR. 15OS. 15OT. 15OU. 15OV. 15OW. 15OX. 15OY. 15OZ. 15PA. 15PB. 15PC. 15PD. 15PE. 15PF. 15PG. 15PH. 15PI. 15PJ. 15PK. 15PL. 15PM. 15PN. 15PO. 15PP. 15PQ. 15PR. 15PS. 15PT. 15PU. 15PV. 15PW. 15PX. 15PY. 15PZ. 15QA. 15QB. 15QC. 15QD. 15QE. 15QF. 15QG. 15QH. 15QI. 15QJ. 15QK. 15QL. 15QM. 15QN. 15QO. 15QP. 15QQ. 15QR. 15QS. 15QT. 15QU. 15QV. 15QW. 15QX. 15QY. 15QZ. 15RA. 15RB. 15RC. 15RD. 15RE. 15RF. 15RG. 15RH. 15RI. 15RJ. 15RK. 15RL. 15RM. 15RN. 15RO. 15RP. 15RQ. 15RR. 15RS. 15RT. 15RU. 15RV. 15RW. 15RX. 15RY. 15RZ. 15SA. 15SB. 15SC. 15SD. 15SE. 15SF. 15SG. 15SH. 15SI. 15SJ. 15SK. 15SL. 15SM. 15SN. 15SO. 15SP. 15SQ. 15SR. 15SS. 15ST. 15SU. 15SV. 15SW. 15SX. 15SY. 15SZ. 15TA. 15TB. 15TC. 15TD. 15TE. 15TF. 15TG. 15TH. 15TI. 15TJ. 15TK. 15TL. 15TM. 15TN. 15TO. 15TP. 15TQ. 15TR. 15TS. 15TT. 15TU. 15TV. 15TW. 15TX. 15TY. 15TZ. 15UA. 15UB. 15UC. 15UD. 15UE. 15UF. 15UG. 15UH. 15UI. 15UJ. 15UK. 15UL. 15UM. 15UN. 15UO. 15UP. 15UQ. 15UR. 15US. 15UT. 15UU. 15UV. 15UW. 15UX. 15UY. 15UZ. 15VA. 15VB. 15VC. 15VD. 15VE. 15VF. 15VG. 15VH. 15VI. 15VJ. 15VK. 15VL. 15VM. 15VN. 15VO. 15VP. 15VQ. 15VR. 15VS. 15VT. 15VU. 15VV. 15VW. 15VX. 15VY. 15VZ. 15WA. 15WB. 15WC. 15WD. 15WE. 15WF. 15WG. 15WH. 15WI. 15WJ. 15WK. 15WL. 15WM. 15WN. 15WO. 15WP. 15WQ. 15WR. 15WS. 15WT. 15WU. 15WV. 15WW. 15WX. 15WY. 15WZ. 15XA. 15XB. 15XC. 15XD. 15XE. 15XF. 15XG. 15XH. 15XI. 15XJ. 15XK. 15XL. 15XM. 15XN. 15XO. 15XP. 15XQ. 15XR. 15XS. 15XT. 15XU. 15XV. 15XW. 15XX. 15XY. 15XZ. 15YA. 15YB. 15YC. 15YD. 15YE. 15YF. 15YG. 15YH. 15YI. 15YJ. 15YK. 15YL. 15YM. 15YN. 15YO. 15YP. 15YQ. 15YR. 15YS. 15YT. 15YU. 15YV. 15YW. 15YX. 15YY. 15YZ. 15ZA. 15ZB. 15ZC. 15ZD. 15ZE. 15ZF. 15ZG. 15ZH. 15ZI. 15ZJ. 15ZK. 15ZL. 15ZM. 15ZN. 15ZO. 15ZP. 15ZQ. 15ZR. 15ZS. 15ZT. 15ZU. 15ZV. 15ZW. 15ZX. 15ZY. 15ZZ.		14A. NEW 14B. VICE 14C. P. A. 14D. REAL	
17. APPROPRIATION		18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	
FROM:		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	
TO:		20. LEGAL RESIDENCE	
		<input type="checkbox"/> CLAIMED <input checked="" type="checkbox"/> PROVED STATE:	
21. STANDARD FORM 52 REMARKS			
22. CLEARANCES A. <input type="checkbox"/> B. <input type="checkbox"/> C. <input type="checkbox"/> D. <input type="checkbox"/> E. <input type="checkbox"/> INITIAL OR SIGNATURE DATE REMARKS 23. CEIL. OR POS. CONTROL 24. CLASSIFICATION 25. PLACEMENT OR EMPL. 26. APPROVED BY 4 June 1953			



25

1 June 1953

Washington, D. C.
Intel. Anal.

FI/RI

GS-4
GS-5

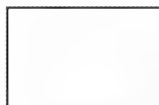
BV-469.08
GS-4

BV-469.08
GS-5

High School Graduate, 2 years of Business College

Treasury Dept., Accounting Clerk, GS-2, May 1950 to Jan. 1952
GS-3, Jan. 1952 to April 1952

OSO/RI, File Section, File Clerk, GS-3, 21 April 1952 to 17 Aug. 1952
GS-4, 17 Aug. 1952 to 16 March 1953
DDP/FI/RI, Consolidation Section, Mail & File Clerk, GS-4, 16 March 1953 to present



Chief, RI

STANDARD FORM 52 FORM 52-1 (Rev. 1-55) U. S. GOVERNMENT PRINTING OFFICE WASHINGTON, D. C. 20540		10-5720-2	
REQUEST FOR PERSONNEL ACTION			
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)		2. DATE OF BIRTH	
3. REQUEST NO.		4. DATE OF REQUEST	
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED:	
B. POSITION (Specify whether establish, change grade or title, etc.)		7. C. S. OR OTHER LEGAL AUTHORITY	
B. APPROVED: 26 Apr 53		Sola-	
FROM: Mail & File Clerk GS-4-305 \$3175.00 pa DDP/FI/RI Processing & Records Branch Consolidation Section Washington, D.C.		TO: Intel. Anal. GS-4-132 \$3175.00 pa DDP/FI/RI Processing & Records Branch Consolidation Section Washington, D.C.	
8. POSITION TITLE AND NUMBER		9. SERVICE GRADE AND SALARY	
10. ORGANIZATIONAL DESIGNATION		11. HEADQUARTERS	
12. FIELD OR DEPARTMENTAL		13. FIELD OR DEPARTMENTAL	
A. REMARKS (Use reverse if necessary) Position BV-364.08 has been deleted from the T/O.		14. POSITION CLASSIFICATION ACTION	
15. VETERAN PREFERENCE		16. DATE OF APPOINTMENT AFFIDAVIT (ACQUISITION ONLY)	
17. APPROPRIATION		18. LEGAL RESIDENCE	
19. STANDARD FORM 50 REMARKS		20. LEGAL RESIDENCE	
21. CLEARANCES		22. LEGAL RESIDENCE	
23. INITIAL OR SIGNATURE		24. LEGAL RESIDENCE	
25. DATE		26. LEGAL RESIDENCE	
27. REMARKS:		28. LEGAL RESIDENCE	
29. APPROVED BY		30. LEGAL RESIDENCE	

STANDARD FORM 52
FORMS ISSUED BY THE
U. S. CIVIL SERVICE COMMISSION
JANUARY 1950 - FEDERAL PERSONNEL
MANUAL, CHAPTER 20

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST 2 March 53
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		9. APPROVED: 15 March 53 Jha	

FROM: File Clerk GS-4-305 \$3175.00 pa DD/P/PI/RI Processing & Records Branch File Section Washington, D.C.	10. POSITION TITLE AND NUMBER 11. SERVICE, GRADE, AND SALARY 12. ORGANIZATIONAL DESIGNATIONS 13. HEADQUARTERS 14. FIELD OR DEPARTMENTAL	TO: Mail & File Clerk BV-364.08 GS-4-305 \$3175.00 pa DD/P/PI/RI Processing & Records Branch Consolidation Section Washington, D.C.	15. FIELD <input type="checkbox"/> DEPARTMENTAL <input checked="" type="checkbox"/>
---	--	--	---

16. REMARKS (Use reverse if necessary)

From BV-356 to BV-364.

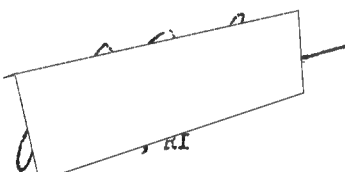
17. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)	18. REQUEST APPROVED Signature: [Signature] Title: [Signature] F.I. 100
--	---

19. VETERAN PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> TOTAL <input type="checkbox"/> 5 PT. <input type="checkbox"/> 10 POINT <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/>	20. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/>	21. DATE OF APPOINTMENT AFFIDAVIT (ACCESSORS ONLY)	22. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
--	--	--	---

23. STANDARD FORM 50 REMARKS

24. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR ENPL.			
E.			

25. APPROVED BY	3/6/53
-----------------	--------

PERSONNEL ACTION REQUEST				REGISTER NO.	
NAME			REQUESTED EFFECTIVE DATE		
NATURE OF ACTION Promotion			17 Aug 52		
			WHEN LEAVING (VOUCHERED)		
			LAST WORKING DAY:		
			EMPLOYEE'S SIGNATURE:		
FROM			TO		
TITLE		X-39.04		X-102.22	
File Clerk		File Clerk			
GRADE AND SALARY		GS-3-305 \$2950.00 per annum		GS-4-305 \$3175.00 per annum	
OFFICE		OSO		OSO	
DIVISION		RI		RI	
BRANCH AND SECTION		Processing & Records Branch File Section		Analysis & Operations Branch Service & Correspondence Section	
OFFICIAL STATION		Washington, D.C.		Washington, D.C.	
DEPARTMENTAL <input checked="" type="checkbox"/>		FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>	
REMARKS:					
From X-39.04 to X-102.22					
Subject has been in grade since 21 April 1952.					
Approved: 					
31 July 52					
RECOMMENDED:					
FOR USE OF PERSONNEL ONLY					
PLACEMENT			TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED			APPROPRIATION		
			11X2100		
			2309-00		
CLEARANCE REQUESTED			C S ACTIVITY:		
DATE TYPE			DATE SIGNATURE		
			8-11-52		
DATE SIGNATURE			PERSONNEL RELATIONS		
			DATE SIGNATURE		
CLASSIFICATION			APPROVALS		
BUREAU NO.			DATE		
C. S. C. NO.			SIGNATURE OF EXECUTIVE		
DATE APPROVED					
NEW VICE P. A. REAL			DATE SIGNATURE		
8/13/52			2 Aug 52		
EFFECTIVE DATE					

21. To: RELEASING ORGANIZATION—You are requested to furnish promptly the leave data on

From 11 May 1950 to 19 April 1952
Fiscal Acct. Clerk GS - 3 \$2950.00 per annum
SUPERVISOR: Miss Ryan
U.S. Treasury Department
Pennsylvania Avenue
Washington, D.C.
PLEASE FORWARD FILE AND LEAVE RECORD TO:

File
[Redacted Box]

NOTE

If this address is not the correct one to which future inquiries should be mailed, be sure to insert the correct address under item 20a.

FOLD HERE FOR MAILING
IN WINDOW ENVELOPE

16-61924-1

22. Return to: EMPLOYING ORGANIZATION

FORWARD OFFICIAL PERSONNEL FOLDER TO
R. H. J. HARRING,
CENTRAL INTELLIGENCE AGENCY
2425 E STREET, N.W.
WASHINGTON 25, D.C.

To: RELEASING ORGANIZATION—You are requested to furnish promptly the leave data on

From 11 May 1950 to April 1952
Fiscal Acct. Clerk GS 3 \$2950.00
U.S. Treasury Dept.
15th & Penna. Ave N.W.
Washington D.C.

[Redacted Box]
NAME OF EMPLOYEE

NOTE

If this address is not the correct one to which future inquiries should be mailed, be sure to insert the correct address under item 18a.

FOLD HERE FOR MAILING
IN WINDOW ENVELOPE

16-61924-2 GPO 11

Return to: EMPLOYING ORGANIZATION

George E. Nelson
2430 E Street N.W.
Washington D.C.

BY 1150 was forwarded by your office
in May 1952. Since this copy has been
detached from our files it is re-
quested that you forward a copy of
same to the address at left.

115 P.S.L.

Lee

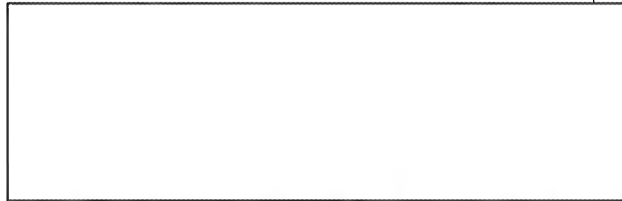
ENTRANCE ON DUTY NOTICE	
1. TO OEO NY	2. DATE 22 April 1952
Notice of Final Processing of Applicant for Entrance on Duty	
3. NAME <div style="border: 1px solid black; width: 100px; height: 1.2em; margin: 0 auto;"></div>	4. ENTRANCE SALARY \$2950.00
5. TITLE T - File Clerk	6. GRADE GS - 3
<p>The applicant named in item 3 above meets all standards for full employment with CIA. Signed clearance for entrance on duty has been received from Inspection and Security and made a part of the personnel file of this individual. Effective this date he/she is assigned to duty with your office.</p> <p>File - 26 April 1952 Let. - 23 April at 1:00 P.M.</p> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border: 2px solid black; padding: 5px; text-align: center;"> POSTED APR 30 1952 </div> <div style="text-align: right;"> <div style="border: 1px solid black; width: 100px; height: 1.2em; display: inline-block;"></div> <i>ued</i> PERSONNEL OFFICER </div> </div>	

FORM NO. 27-114
JAN 1952

(4)

Date _____

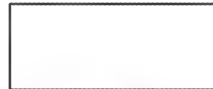
APR 4 1952



Your employment has been approved by this Agency at \$ 2950 per annum, subject to the satisfactory completion of additional processing on the day you enter on duty. It is requested that you report to the Receptionist, East End of Temporary "I" Building located at 17th and Independence Avenue, S. W., at 8:30 a.m. as soon as possible.

Please advise Mrs. Brown, 2410 "B" Street, N. W., by telephone, Executive 6115, Extension 3493 of your exact reporting date.

Sincerely yours,



4 - 1952

Personal Division

Subject telephoned 4-5-52 (date) spoke with EJS

Subject will EOD 21 Apr 52 - New W/Treasury

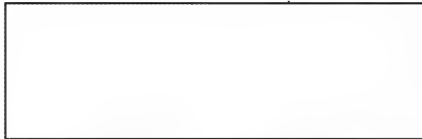
SUBJECT WILL NOT EOD; REASON: _____

Not met
4/8

CENTRAL INTELLIGENCE AGENCY

2430 E STREET NW.
WASHINGTON 25, D. C.

22 March 1952



In reference to your application for employment, this letter is to assure you that the processing of your papers as a GS-3, \$ 2950 per annum is being continued by this agency. A definite offer of employment cannot be made, however, until such time as all processing has been completed.

The processing is a rather lengthy one; but when further information is available, we shall get in touch with you immediately.

In the meantime, it would be appreciated if you would advise us of any change in your present status, such as change of address, etc.

Your continued interest and patience are appreciated.

Very truly yours,

A rectangular box with a black border, used to redact the signature of the official.

Personnel Division

OUTGOING CLASSIFIED MESSAGE

PAGE NO

CENTRAL INTELLIGENCE AGENCY

DATE: <u>5 Mar 52</u>	ROUTINE <input type="checkbox"/>	PRIORITY <input type="checkbox"/>	URGENT <input type="checkbox"/>
FROM: <u>PDC</u>	(ORIGINATING OFFICER)		(PHONE EXTENSION)
TRANSMIT TO:			
	<i>see new address on route sheet</i> (CLASSIFICATION)		

TYPE IN CAPITAL LETTERS, DOUBLE SPACED

TELEGRAM - NIGHT LETTER

EMPLOYMENT APPROVED THIS AGENCY \$ 2750 PER ANNUM, SUBJECT SATISFACTORY COMPLETION OF ADDITIONAL PROCESSING. DESIRE REPORT SOONEST POSSIBLE RECEPTIONIST, EAST END TEMPORARY "I" BUILDING, 17TH AND INDEPENDENCE AVENUE, SOUTHWEST, WASHINGTON, D. C. AT 8:30 A.M. ADVISE MRS. BROWN 2430 "E" STREET NORTHWEST, BY COLLECT NIGHT LETTER OR COLLECT PHONE, EXECUTIVE 6115, EXTENSION 3698 THE EXACT REPORTING DATE.

*Is now a
 98-3 (see last PHS)
 won't take a 98-2.
 for
 8 March*

RELEASING OFFICER

COORDINATING OFFICERS

AUTHENTICATING OFFICER

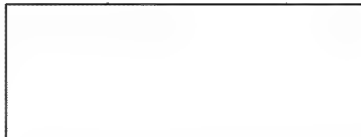
CLASSIFICATION

CENTRAL INTELLIGENCE AGENCY

2430 E STREET NW.

WASHINGTON 25, D. C.

20 February 1952
In reply refer to ED-4



This is to advise that actual processing of your application for employment with this Agency has been initiated. Specific details as to the type of appointment and salary will be contained in subsequent correspondence. Please direct all future correspondence to the undersigned.

If applicable, the attached form should be completed and returned within two weeks. Thank you for your prompt attention to this matter.

Very truly yours,



Personnel Division

Enclosure

- 2 37-82
- 1 Appand
- 1 CUS

Please forward three passport size photographs at your earliest convenience.

m 0

CERTIFICATE OF ATTENDANCE

I certify that on APR 28 1952 I have attended
the Agency Indoctrination Course specified by Regulation
25-1.



APR 30 1952


FORM NO. 51-121
DEC 1951

161

384

FORM NO. 37-115
MAY 1950

*File
WD*

TO: Medical Division
FROM: Transactions & Records
SUBJECT: 

Request that above named subject be given a physical examination.

POSITION: File Clerk

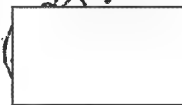
GRADE: GS - 3

BRANCH: CSO RI

SERVICE: DEPT.

NATURE OF APPOINTMENT: EXC.

OK



FORM NO. 37-115
MAY 1950

PERSONNEL ACTION REQUEST				REGISTER NO.
NAME		REQUESTED EFFECTIVE DATE APR 21 1952		
NATURE OF ACTION Excepted Appointment		WHEN LEAVING (VOUCHERED) LAST WORKING DAY: EMPLOYEE'S SIGNATURE:		
FROM		TO		
TITLE		File Clerk L-39.04-2		
GRADE AND SALARY		GS-305 \$2950.00		
OFFICE		OSO		
DIVISION		RI		
BRANCH AND SECTION		Processing and Records Branch File Section		
OFFICIAL STATION		Washington, D.C.		
DEPARTMENTAL <input type="checkbox"/> FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		
REMARKS: (To P-39.04) gw Approved: 15 FEB 1952				
RECOMMENDED: 15 Feb 52				
FOR USE OF PERSONNEL ONLY				
PLACEMENT		TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED		APPROPRIATE 2123400		
CLEARANCE REQUESTED		ALLOTMENT 3009		
DATE		C. S. C. AUTHORITY Sch AC. 116 (8)		
TYPE		DATE SIGNATURE		
DATE		SIGNATURE		
SIGNATURE		PERSONNEL SIGNATURE		
CLASSIFICATION		DATE		
BUREAU NO.		SIGNATURE		
C. S. C. NO.		DATE		
DATE APPROVED		APPROVAL		
FILE		DATE		
VICE		SIGNATURE OF EMPLOYEE		
L. A.		DATE		
REAL		DATE		
DATE		DATE		
EFFECTIVE DATE		DATE		

REQUEST FOR SECURITY CLEARANCE				REQUEST NO.	
				H-3007A	
				DATE	
FULL NAME (Last) (First) (Middle)				YEAR OF BIRTH	
				1929	
POSITION TITLE			GRADE	CODE	
FILE CLERK			GS-3		
LOCATION (OFFICE)	CODE	DIVISION	CODE	BRANCH	CODE
WFO		NY		WOC-200	
GEOGRAPHIC DESTINATION (CITY AND STATE OR COUNTRY, AS APPROPRIATE)					
A. H. J. C.					
TYPE OF EMPLOYEE					
1. <input checked="" type="checkbox"/> REGULAR 2. <input type="checkbox"/> CONTACT 3. <input type="checkbox"/> CONSULTANT 4. <input type="checkbox"/> MILITARY					
5. <input type="checkbox"/> OTHERS					
FUNDS					
<input checked="" type="checkbox"/> VOUCHERED <input type="checkbox"/> UNVOUCHERED					
TYPE(S) OF SECURITY CLEARANCE REQUESTED					
<input checked="" type="checkbox"/> PROVISIONAL FOR: (Show name of pool or group)					
<input checked="" type="checkbox"/> SECRET					
<input checked="" type="checkbox"/> FULL					
<input type="checkbox"/> WAIVER					
D ST. POOL					
AVAILABILITY DATE (Mo-Mo-Yr)	EST. CLEARANCE DATE (Mo-Yr)	RECRUITMENT SOURCE			CODE
					01
SEX AND VETERAN STATUS					
1. <input checked="" type="checkbox"/> M-V 2. <input type="checkbox"/> M-NV 3. <input type="checkbox"/> F-V 4. <input type="checkbox"/> F-NV					
REMARKS:					
SECURITY INITIATED BY NORTH. SUSPENDED ACTION OF 1/5/52. CHAIRMAN OF OFFICE, DIVISION & BRANCH.					
Attachments:					
FMS					
Append. I					
Photos.					
				SIGNATURE	
				DATE	

Office Memorandum • UNITED STATES GOVERNMENT

TO :

Jarema

DATE: 8 Feb. 1952

FROM :

SUBJECT:

In Process as G S 2 Clerk. He wants accounting clerk eventually, but there are no openings at present, & we have two other - better qualified - accounting clerks in process in reserve at present.

Possibility for microfilm trainee?

P.O.
12-26

MP

[Redacted]
January 12, 1952

Dear Sir:

I received your letter dated January 5, stating that I was to inform you of any changes in my present status.

I am now a grade GS 2 with an one year increase. I am now being considered for a grade GS 3 in the Treasury Dept. I assure you, this does not lessen my zeal to get in the C.I.A.

I would like to know if your Agency would transfer or consider me for appointment at a grade GS 3.

Sincerely yours,

[Redacted]

REQUEST FOR SECURITY CLEARANCE				REQUEST NO.	
				DATE 11-20-57	
FULL NAME (Last) (First) (Middle)		YEAR OF BIRTH 11/52			
POSITION TITLE		GRADE		CODE	
LOCATION (OFFICE)	CODE	DIVISION	CODE	BRANCH	CODE
Personnel		Personnel (0)		Personnel Pool	
GEOGRAPHIC DESTINATION (CITY AND STATE OR COUNTRY, AS APPROPRIATE)					
Washington, D. C.					
TYPE OF EMPLOYEE 1. <input type="checkbox"/> REGULAR 2. <input type="checkbox"/> CONTACT 3. <input type="checkbox"/> CONSULTANT 4. <input type="checkbox"/> MILITARY 5. <input type="checkbox"/> OTHER					
FUNDS <input type="checkbox"/> VOUCHERED <input type="checkbox"/> UNVOUCHERED					
TYPE(S) OF SECURITY CLEARANCE REQUESTED					
<input type="checkbox"/> PROVISIONAL POOL (Show name of pool or group)					
D. Street Pool					
<input type="checkbox"/> SECRET					
<input type="checkbox"/> FULL					
<input type="checkbox"/> WAIVER					
AVAILABILITY DATE (Mo-No-Yr)	EST. CLEARANCE DATE (Mo-Yr)		RECRUITMENT SOURCE		CODE
					CL
SEX AND VETERAN STATUS 1. <input type="checkbox"/> M-V 2. <input type="checkbox"/> M-NV 3. <input type="checkbox"/> F-V 4. <input type="checkbox"/> F-NV					
REMARKS:					
<div style="text-align: right;"> <i>11-17-52</i> </div>					
Attachments: <input type="checkbox"/> FHS <input type="checkbox"/> Append, I <input type="checkbox"/> Photos.					
<div style="text-align: center;"> CONFIDENTIAL </div>					
<div style="text-align: right;"> Chief, Personnel Division DIVISION </div>					

5 January 1952



You are being considered for employment with the Central Intelligence Agency at grade GS-2, salary ~~\$2750.00~~ per annum.

The appointment, if offered, will be temporary indefinite in nature. Processing procedures require about 30 days to complete. Unless you are notified to the contrary during this period, you may assume that you are being actively considered for employment. Upon completion of this processing, we will contact you immediately.

In the meantime, it would be appreciated if you will keep us advised of any changes in your present status, such as change of address, etc.

Please let us know immediately if during the interim you find that you will not be able to accept employment with this organization.

Very truly yours,



Chief, Personnel Division

<div style="text-align: center;"> CONFIDENTIAL REQUEST FOR SECURITY CLEARANCE SECURITY INFORMATION </div>				REQUEST NO.	
FULL NAME		(MIDDLE)		DATE 4 JAN. 1952	
POSITION CLERK		GRADE GS 2		YEAR OF BIRTH 1928	
LOCATION (OFFICE) POOL	CODE	DIVISION	CODE	BRANCH	CODE
GEOGRAPHIC DESTINATION (CITY AND STATE OR COUNTRY, AS APPROPRIATE)					
TYPE OF EMPLOYEE 1. <input checked="" type="checkbox"/> REGULAR 2. <input type="checkbox"/> CONTACT 3. <input type="checkbox"/> CONSULTANT 4. <input type="checkbox"/> MILITARY 5. <input type="checkbox"/> OTHER:					
FUNDS <input checked="" type="checkbox"/> VOUCHERED <input type="checkbox"/> UNVOUCHERED					
TYPE(S) OF SECURITY CLEARANCE REQUESTED <input checked="" type="checkbox"/> PROVISIONAL FOR: (show name of pool or group) <input checked="" type="checkbox"/> SECRET <input checked="" type="checkbox"/> FULL <input type="checkbox"/> WAIVER					
AVAILABILITY DATE (dd-mo-yr) 1/5	EST. CLEARANCE DATE (mo-yr)		RECRUITMENT SOURCE		CODE 01
SEX AND VETERAN STATUS 1. <input checked="" type="checkbox"/> M-V 2. <input type="checkbox"/> M-NV 3. <input type="checkbox"/> F-V 4. <input type="checkbox"/> F-NV					
REMARKS:					
89 to Mel. Jan 1/5 Attachments: FHS _____ Append. I _____ Photos. _____					
CONFIDENTIAL SECURITY INFORMATION			SIGNATURE _____ DIVISION _____		

Office Memorandum • UNITED STATES GOVERNMENT

TO : File

DATE: 3 January 1952

FROM :

SUBJECT:

1. Contacted Treasury Dept. this date and Employee Relations Officer stated that subject had no efficiency ratings since he had not been there long enough before being granted mil ough and after his discharge. However, she stated that had been a very satisfactory employee and there was nothing derogatory in his file.

CONFIDENTIAL

REPORT OF INTERVIEW			THIS DATE 18 Dec. 51	
NAME		REFERRED BY		
HOME ADDRESS		TELEPHONE AD 8430		
BUSINESS ADDRESS Treasury		TELEPHONE EX 6400 x2612		
DATE OF BIRTH	PLACE OF BIRTH Forest River, N. D.	CITIZENSHIP (HOW ACQUIRED) US		
NAME OF SPOUSE none - no expectations				
DATE OF BIRTH	PLACE OF BIRTH	CITIZENSHIP (HOW ACQUIRED)		
SALARY REQUESTED GS-2	NO. OF DEPENDENTS none	INTERVIEWER		
EDUCATION (SCHOOLS, DEGREES, DATES, MAJORS, EXTRA-CURRICULAR ACTIVITIES)				
Hadlich's Bus. Sch. Diploma in fr. accounting				
MAJOR EMPLOYMENT HISTORY (PRINCIPAL OCCUPATION, SPECIAL SKILLS, SALARY LEVELS)				
Present - Treasury Dept. I/A attached				
MILITARY OCCUPATION (RANK, SERIAL NO., DATES OF SERVICE, DUTIES AND AREAS)				
Oct 1, 1946 Apr 12, 1948				
Oct 19, 1950 Aug 7, 1951				
Pfc (Infantry)				

CONFIDENTIAL

AREA KNOWLEDGE (RESIDENCE OR STUDY)

Japan, Korea (US Army) No 10-9

LANGUAGE FACILITY

None

EVALUATION AND RECOMMENDATIONS (BE COMPLETE AND JUSTIFY DECISIONS, NOTE ANY UNFAVORABLE CIRCUMSTANCES.)

A CLEAN CUT, BRIGHT EYED, EAGER YOUNGSTER, VERY AMBITIOUS BUT HAS HAD LIMITED EXPERIENCE. HE WOULD LIKE TO GET INTO ACCOUNTING, BUT HE HAS HAD ONLY BASIC ACCOUNTING AND HAS NEVER HAD A JOB IN ACCOUNTING TO TEST HIM. HE IS WILLING TO TAKE A CLERK JOB IF HE WILL GET A CLEARANCE AT ACCOUNTING. WILL GO O/S. FEELS HE IS BLOCKED IN HIS JOB IN TREASURY DEPT. SINCE HE WILL COME AS A GS-2, I WOULD TAKE A CHANCE ON HQ HIM IF HIS TESTS SHOW ANYTHING ENCOURAGING. HE EXPECTS TO ENTER STRATERS COLLEGE OF ACCOUNTING (NIGHT) IN FEBRUARY. DOES NOT DESIRE POOL. SUGGEST MISS MC KENNEY LOOK HIM OVER. FORMS ATTACHED. HAS BEEN SCHEDULED FOR GS-1 CLERK-ACCT. TEST ON 20 DECEMBER.

FORMS GIVEN:

☐ PHS

☐ MEDICAL

☐ RESERVE

SIGNATURE OF INTERVIEWER

CONFIDENTIAL

MEMORANDUM TO: Personnel Division
Central Intelligence Agency
2430 "E" Street, N. W.
Washington, 25, D. C.

DEC 3 1951

SUBJECT: Availability of [redacted]

1. This is to advise you that no objection is interposed to your consideration of the application for employment of the above-named individual who is presently employed by this office.

2. In the event this employee is accepted by your Agency, it is requested that the individual named below be contacted relative to the effective date of his ~~transfer~~ release.

[redacted]
(Signature)

Acting Personnel Officer
(Title)

Bureau of Accounts.
Treasury Department
(Agency)

Contact for further information:

[redacted]
(Name) Employee Relations Officer

Code 172, Extension 2628
(Telephone)

SECRET

REPRODUCTION MASTERS

SECRET

BIOGRAPHY

BIOGRAPHIC PROFILE

SECRET

Handle With Care

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE 12 May 1975	FILE NO. 2542
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, CP	SS NO.	
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, CP	EMPLOYEE NUMBER	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) CCS	ID CARD NUMBER	
ATTN:	CHIEF ADMIN STAFF	OFFICIAL COVER	<input type="checkbox"/> ESTABLISHED <input checked="" type="checkbox"/> DISCONTINUED
REF:	VERBAL REQUEST		
SUBJECT		UNIT	
KEEP ON TOP OF FILE WHILE COVER IN EFFECT			
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS	
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE		<input checked="" type="checkbox"/> EFFECTIVE DATE: EOB	
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TDY _____ OTHER (Specify)		<input checked="" type="checkbox"/> SUBMIT FORM 3254 CIA W-2 TO BE ISSUED. (HNB 20-11)	
SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____		<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY 2 (HNB 20-7)	
SUBMIT FORM 3254 (HNB 20-11)		<input checked="" type="checkbox"/> EAA: CATEGORY I <input checked="" type="checkbox"/> CATEGORY II	
SUBMIT FORM 1322 FOR ANY CHANGE IN COVER. (HR 240-20)		<input checked="" type="checkbox"/> RETURN ALL OFFICIAL DOCUMENTATION TO CCS	
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-20)		<input checked="" type="checkbox"/> DO NOT PUT IN THIS FILE	
EAA: CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>			
SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD			
REMARKS AND/OR COVER HISTORY			
COPY 1 - CD OR CPU COPY 2 - OPERATING COMPONENT COPY 3 - OS/BRACD COPY 4 - OC-OO/TED COPY 5 - CFS-FILE EDF:JP		CHIEF, OFFICIAL ATT	

FORM 1551 USE PREVIOUS EDITION

SECRET

E2 IMPDET CL BY

(10-20-43)

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP			FILE NO.
TO: (Check)	CHIEF, CONTROL DIVISION, OP	SS NUMBER	
	CHIEF, CONTRACT PERSONNEL DIVISION, OP	EMPLOYEE NUMBER	
	CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER	
ATTN:		OFFICIAL COVER	ESTABLISHED
REF:			DISCONTINUED
SUBJECT		UNIT	
KEEP ON TOP OF FILE WHILE COVER IN EFFECT			
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS	
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE _____		EFFECTIVE DATE: _____	
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TO _____		SUBMIT FORM 3254 TO BE ISSUED (HR 20-11)	
SUBMIT FORM 642 FOR ANY CHANGE AFFECTING THIS COVER. (HR 20-7)		SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-20)	
SUBMIT FORM 3254 TO BE ISSUED. (HR 20-11)		SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-20)	
EAA, CATEGORY I		EAA, CATEGORY II	
SUBMIT FORM 2688 FOR HOSPITALIZATION CARD		DO NOT WRITE IN THIS BLOCK	
REMARKS AND/OR COVER HISTORY			
DISTRIBUTION:			
COPY 1 - CD OR CPO			
COPY 2 - OPERATING COMPONENT			
COPY 3 - OS/SHACO			
COPY 4 - GL/TFB			
COPY 5 - CCS-FILE			

FORM 1551 USE PREVIOUS EDITION

SECRET

U.S. GOVERNMENT PRINTING OFFICE: 1967 O 307622

613-20-42

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP			DATE 10 May 1971	
TO: (Check)	<input checked="" type="checkbox"/>	CHIEF, CONTROL DIVISION	FILE NUMBER 2542	
	<input type="checkbox"/>	CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER []	
	<input checked="" type="checkbox"/>	CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER []	
ATTN: EUR/Chief Support Staff		OFFICIAL COVER	<input checked="" type="checkbox"/>	BACKSTOP ESTABLISHED
REFS: Form 1413 dated 6 May 1971				DISCONTINUED
SUBJECT []		UNIT []		
KEEP ON TOP OF FILE WHILE COVER IN EFFECT				
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS (OPM 20-800-11)			CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS (OPM 20-800-11)	
A. TEMPORARILY FOR _____ DAYS EFFECTIVE DATE _____			DATE _____	
B. CONTINUING AS OF From EOD				
<input checked="" type="checkbox"/>	SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)		SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)	
<input checked="" type="checkbox"/>	ASCERTAIN THAT <u>State</u> W-2 BEING ISSUED. (HNB 20-11)		RETURN ALL OFFICIAL DOCUMENTATION TO CCS.	
<input checked="" type="checkbox"/>	SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR-240-20)		DO NOT WRITE IN THIS BLOCK - FOR CCS INTERNAL USE ONLY	
<input checked="" type="checkbox"/>	SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR-240-20)			
<input checked="" type="checkbox"/>	SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD			
REMARKS AND/OR COVER HISTORY []				
DISTRIBUTION: COPY 1 - CD COPY 2 - OPERATING COMPONENT COPY 3 - O/OB COPY 4 - OL/TELECOM COPY 5 - HR COPY 6 - EOB - FILE RF:km			CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF []	

FORM 1551 USE PREVIOUS EDITIONS
12-70

SECRET

(13-20-43)

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DA 12 November 1970	
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, RECORDS AND CONTROL	FILE NUMBER 2542	
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER 16032	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER 740-542	
ATTN: EME/ Chief Support Staff		OFFICIAL COVER	<input checked="" type="checkbox"/> BACKSTOP ESTABLISHED
REF: Form 1322			<input type="checkbox"/> DISCONTINUED
SUBJECT: 		UNIT Records Analysis Group	
KEEP ON TOP OF FILE WHILE COVER IN EFFECT			
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS (OCS 20-200-11)		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS (OCS 20-200-11)	
A. TEMPORARILY FOR _____ DAYS EFFECTIVE DATE COB _____		DATE (no. of COB) _____	
B. CONTINUING AS OF COB Aug 57			
<input checked="" type="checkbox"/>	SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNS 20-7)	<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNS 20-7)	
<input checked="" type="checkbox"/>	ASCERTAIN THAT <u>Army</u> W-2 BEING ISSUED. (HNS 20-11)	<input type="checkbox"/> RETURN ALL OFFICIAL DOCUMENTATION TO CCS.	
<input checked="" type="checkbox"/>	SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR-240-3a)	DO NOT WRITE IN THIS BLOCK - FOR CCS INTERNAL USE ONLY	
<input checked="" type="checkbox"/>	SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR-240-3a)		
<input type="checkbox"/>	SUBMIT FORM 2688 <input checked="" type="checkbox"/> FOR HOSPITALIZATION CARD		
REMARKS AND/OR COVER HISTORY			
<div style="float: left; width: 40%; border: 1px solid black; margin-bottom: 5px;"></div> <div style="float: right; width: 50%; text-align: right;"> </div>			
DISTRIBUTION: COPY 1 - HQ COPY 2 - OPERATING COMPONENT COPY 3 - 3-03 COPY 4 - 3-04 COPY 5 - 3-05 COPY 6 - 3-06 COPY 7 - 3-07 COPY 8 - 3-08 COPY 9 - 3-09 COPY 10 - 3-10		<div style="border: 1px solid black; width: 150px; height: 30px; margin: 0 auto;"></div>	

FORM 1551

SECRET

(12 20-43)

SECRET

6 Mar 59

File: 2512

MEMORANDUM FOR: Chief, Records and Services Division
Office of Personnel

SUBJECT: [REDACTED]

1. [REDACTED] arrangements ~~have been completed~~ have been completed for the above-named Subject.

2. Effective as 5 Mar 1959, it is requested that your records be properly blocked ~~as follows~~ [REDACTED]

3. This memorandum confirms an oral request of 6 Mar 59 by [REDACTED] Room 1608 "L" Building, Extension 2420.

[REDACTED]
HARRY W. LITTLE, JR.
Chief, Central Cover Division

cc: SSD/OS

SECRET
REMAIN
FORM 1580a
UN FILE

(4-12-40)

SECRET

DEC 5 1956
(Date)

MEMORANDUM FOR: Chief, Records & Services Division
Office of Personnel

THROUGH : Security Support Division
Office of Security

SUBJECT :

1. [] arrangements have been completed for the above named subject who will be visiting a foreign country for a _____ day TDY trip.

2. Effective this date, it is requested that your records be properly ~~EXAMINED~~ (re-opened) to ~~EXAM~~ (acknowledge) subject's current Agency employment by an external inquirer.

[]
Chief, Official Cover & Liaison, CCB

CC: SSD/SS

THIS INFO MUST REMAIN
ON TOP OF FILE
SECRET

7/2
12-11-57

RMR 080878

SECRET
(When Filled In)

unable to locate

NOTIFICATION OF PERSONNEL ACTION

OFF

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
3. RETIREMENT (VOLUNTARY)		4. EFFECTIVE DATE	
UNDER CIA RETIREMENT AND DISABILITY SYSTEM		08 04 78	
5. CATEGORY OF EMPLOYMENT		REGULAR	
6. FUNDS		7. TAN AND NSCA	
V TO V		V TO CF	
CF TO V		CF TO CF	
8. CSC OR OTHER LEGAL AUTHORITY		9. ORGANIZATIONAL DESIGNATIONS	
DDO/IMS		10. LOCATION OF OFFICIAL STATION	
INFORMATION MGMT AND PLANNING GROUP		WASH., D.C.	
RECORDS MANAGEMENT BRANCH		11. POSITION TITLE	
AREAS UNIT		RECORDS ADMIN OFF NE	
12. POSITION NUMBER		13. SERVICE DESIGNATION	
CB45		DCC	
14. CLASSIFICATION SCHEDULE (GS, WS, etc.)		15. OCCUPATIONAL SERIES	
GS		0344.01	
16. GRADE AND STEP		17. SALARY OR RATE	
13 2		26889	
18. REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

9. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGRITY CODE		24. MODAL CODE		25. DATE OF SER		26. DATE OF GRADE		27. DATE OF LEI	
45		10		NUMERIC ALPHABETIC		CODE		CODE		CODE		MO DA YR		MO DA YR		MO DA YR	
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION		33. SECURITY REQ NO		34. SEX					
MO DA YR		CSC CIA A NON		CODE		OBJ0000		MO DA YR		EOD DATA							
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEHAI - HEALTH INSURANCE		40. SOCIAL SECURITY NO							
CODE		MO DA YR		MO DA YR		CAREER CATEGORY		CODE		CODE		CODE					
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE		42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA											
CODE		CODE		CODE		CODE											
0 - NO PREVIOUS SERVICE		1 - NO DEBTS IN SERVICE		2 - DEBTS IN SERVICE (LESS THAN 3 YRS)		3 - DEBTS IN SERVICE MORE THAN 3 YRS											

SIGNATURE OR OTHER AUTHENTICATION

JLS

tel

SECRET
(When Filled In)

153078

NOTIFICATION OF PERSONNEL ACTION

1. SIGNAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
3. REASSIGNMENT		4. EFFECTIVE DATE MO DA YR 04 09 78	
5. FUNDS		6. CATEGORY OF EMPLOYMENT REGULAR	
7. V TO V		8. V TO CF	
9. CF TO V		10. CF TO CF	
11. ORGANIZATIONAL DESIGNATIONS DDO/IMS INFORMATION MGMT AND PLANNING GROUP RECORDS MANAGEMENT BRANCH AREAS UNIT		12. LOCATION OF OFFICIAL STATION WASH., D.C.	
13. RECORDS ADMIN OFF NE		14. POSITION NUMBER CG45	
15. CLASSIFICATION SCHEDULE (GS, WG, etc.) GS		16. SERVICE DESIGNATION DCC	
17. OCCUPATIONAL SERIES 0344.01		18. GRADE AND STEP 13 2	
19. SALARY OR RATE 26889		20. REMARKS	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
21. ACTION CODE 37		22. EMPLOY CODE 10	
23. OFFICE CODES NUMBER AUTOMATIC 53740 IMS 75013		24. STATION CODE 1	
25. INTEGRITY CODE		26. HOURS CODE	
27. DATE OF BIRTH		28. DATE OF GRADE	
29. DATE OF LET		30. SECURITY REQ NO	
31. RETIREMENT DATA		32. SEPARATION DATA CODE	
33. VET PREFERENCE		34. SERV COMP DATE	
35. LONG COMP DATE		36. CARRIER CATEGORY	
37. PREVIOUS CIVILIAN GOVERNMENT SERVICE		38. HEALTH INSURANCE	
39. SOCIAL SECURITY NO		40. FEDERAL TAX DATA	
41. STATE TAX DATA		42. FORM EXEMPTED	
43. FORM EXEMPTED		44. STATE TAX DATA	
45. SIGNATURE OR OTHER AUTHENTICATION			
FROM: NE			

FORM 114
3-74 (M) 10-78

Use Previous
Edition

SECRET

GPO: 1974 O-307-022 (10-31)

OFF B

OCF

NOV 11 50
274 AM 10 76

The Previous Action

SECRET

U.S. AIR FORCE CL BY CO'S 22 (4-51)

1 SERIAL NO		2 NAME		3 ORGANIZATION		4 FUNDS		5 LWOP HOURS	
6 OLD SALARY RATE				7 NEW SALARY RATE				8 TYPE ACTION	
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	WGI	QSI
		24070	11/23/75			24797	11/20/77		
12	6	52	11/23/75	12	5	52	11/20/77		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE				DATE					
				15 Sept 1977					
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS				APPROVED BY					
FORM 10-73 560E				The previous edition PAY CHANGE NOTIFICATION (4 51)					

11-11-77 3:30 PM

LJF 110977

SECRET
(When Filled In)

OCF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND CANCELLATION OF NSCA			4. EFFECTIVE DATE MO DA YR 07 11 77
			5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS	V TO V CF TO V	V TO CF CF TO CF	7. PAN AND NSCA 8033 4801 0000 50 USC 403 J
9. ORGANIZATIONAL DESIGNATIONS DDO/NE DIVISION OFFICE OF THE CHIEF, NE DIVISION PLANS STAFF			10. LOCATION OF OFFICIAL STATION WASH., D.C.
11. POSITION TITLE RECORDS ADMIN OFF			12. POSITION NUMBER CG45
			13. SERVICE DESIGNATION DCC
14. CLASSIFICATION SCHEDULE (GS, WG, etc.) GS	15. OCCUPATIONAL SERIES 0344.01	16. GRADE AND STEP 12 4	17. SALARY OR RATE 24070
18. REMARKS THIS ACTION REFLECTS NEW LEGISLATIVE PAY INCREASE EFFECTIVE 10/09/77.			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMBER 48075 ALPHABETIC NE	22. STATION CODE 75013
23. INTERVIEW CODE	24. HOURS CODE 1	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR
27. DATE OF LEI MO DA YR	28. DATE EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1. CSM 2. CSM 3. CSM
31. SEPARATION DATA CODE	32. CANCELLATION CANCELLATION DATA TYPE	33. SECURITY REQ. NO.	34. SEX
35. VET PREFERENCE CODE	36. SERV. COMP DATE MO DA YR	37. LONG COMP. DATE MO DA YR	38. CAREER CATEGORY CODE
39. POLY / HEALTH INSURANCE CODE	40. SOCIAL SECURITY NO.	41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE	42. LEAVE CAT CODE
43. FEDERAL TAX DATA FORM EXECUTED 1 - YES 2 - NO	44. STATE TAX DATA FORM EXECUTED 1 - YES 2 - NO	45. TAX EXEMPTIONS CODE	46. STATE TAX DATA FORM EXECUTED 1 - YES 2 - NO
FROM: CCS			
SIGNATURE OR OTHER AUTHENTICATION			

POSTED

NOV 18 1977

ALL

L20 100 045

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12010 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

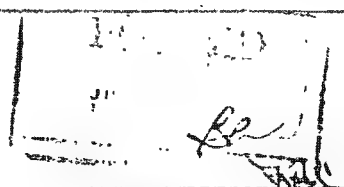
EFFECTIVE DATE OF PAY ADJUSTMENT: 09 OCTOBER 1977

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
		CCS	GS 12 4	\$24,070

15648

KKK: 22 JULY 76

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)									
3 NATURE OF PERSONNEL ACTION REASSIGNMENT - CHANGE OF HOME BASE						4 EFFECTIVE DATE MO DA YR 07 13 76		5 CATEGORY OF EMPLOYMENT REGULAR			
6 FUNDS		X		V TO V		V TO CF		7 PAN AND NBGA T230 0118 0002		8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
CF TO V				CF TO CF							
9 ORGANIZATIONAL DESIGNATIONS DDO/CCS REGISTRY						10 LOCATION OF OFFICIAL STATION WASH., D.C.					
11 POSITION TITLE RECORDS ADMIN OFF CH						12 POSITION NUMBER BL 44		13 SERVICE DESIGNATION DCC			
14 CLASSIFICATION SCHEDULE (OS, LS, etc.) GS				15 OCCUPATIONAL SERIES 0344.01		16 GRADE AND STEP 12 4		17 SALARY OR RATE 21324			
18 REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE 37		20 EMPLOY CODE 10		21 OFFICE CODING NUMERIC 39115		22 STATION CODE ALPHABETIC CCS		23 INTEGRITY CODE 75013		24 RIGHTS CODE 1	
25 DATE OF BIRTH MO DA YR		26 DATE OF GRADE MO DA YR		27 DATE OF LET MO DA YR		28 DATE OF BIRTH MO DA YR		29 DATE OF GRADE MO DA YR		30 DATE OF LET MO DA YR	
31 DATE EXPIRES MO DA YR		32 SPECIAL REFERENCE		33 RETIREMENT DATA 1 CSC 2 SCA 3 FCA 4 NCA		34 SEPARATION DATA CODE		35 CORRECTION / Correction Data YES		36 SECURITY REQ NO	
37 VET PREFERENCE CODE 1 100% 2 50% 3 10%		38 SERV COMP DATE MO DA YR		39 LONG COMP DATE MO DA YR		40 CAREER CATEGORY CAB DEPT CODE TEMP		41 FEGLI - HEALTH INSURANCE CODE 8 - WAIVER HEALTH INS CODE		42 SOCIAL SECURITY NO.	
43 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 2 YRS) 3 BREAK IN SERVICE (MORE THAN 2 YRS)				44 LEAVE CAT CODE		45 FEDERAL TAX DATA FORM EXECUTED 1 YES 2 NO		46 STATE TAX DATA FORM EXECUTED 1 YES 2 NO		47 STATE CODE	
SIGNATURE OR OTHER AUTHENTICATION											
											

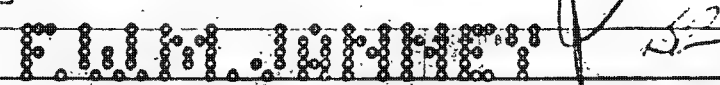
AEO:13 AUG 76

SECRET
(When Filled In)

OCCF												NOTIFICATION OF PERSONNEL ACTION																			
1. SERIAL NUMBER						2. NAME (LAST FIRST-MIDDLE)																									
3. NATURE OF PERSONNEL ACTION										4. EFFECTIVE DATE				5. CATEGORY OF EMPLOYMENT																	
CHANGE OF FAN										08 09 76				REGULAR																	
6. FUNDS						7. PAN AND NSCA						8. CSC OR OTHER LEGAL AUTHORITY																			
X V TO V CF TO V						T230 0130 0002						50 USC 403 J																			
9. ORGANIZATIONAL DESIGNATIONS										10. LOCATION OF OFFICIAL STATION																					
DDO/CCS REGISTRY										WASH., D.C.																					
11. POSITION TITLE										12. POSITION NUMBER				13. SERVICE DESIGNATION																	
RECORDS ADMIN OFF CH										BL44				DCC																	
14. CLASSIFICATION SCHEDULE (GS, 18, etc.)						15. OCCUPATIONAL SERIES				16. GRADE AND STEP				17. SALARY OF RATE																	
GS						0344.01				12 4				21324																	
18. REMARKS																															
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																															
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING				22. STATUS CODE				23. INTEREST CODE				24. MONTH CODE				25. DATE OF BIRTH				26. DATE OF GRADE				27. DATE OF ICI			
37		10		39115 CCS				75013								1															
28. MTR EXPIRES				29. SPECIAL REFERENCE				30. RETIREMENT DATA				31. SEPARATION DATA CODE				32. CONTROL OF INFORMATION DATA				33. SECURITY REQ NO.				34. SEX							
																				EOD DATA											
35. PRT PREFERENCE				36. SERV COMP DATE				37. LONG COMP DATE				38. CASPER CATEGORY				39. HEALTH INSURANCE				40. SOCIAL SECURITY NO.											
CSCA				MO DA YE				MO DA YE				CSCA				CSCA				CSCA											
1 NO PREVIOUS SERVICE 2 NO SERA IN SERVICE 3 SERA IN SERVICE (LESS THAN 3 YRS) 4 SERA IN SERVICE (MORE THAN 3 YRS)				41. LEAVE CAT CODE				42. FEDERAL TAX DATA				43. STATE TAX DATA																			
44. SIGNATURE OR OTHER AUTHENTICATION																															
<div style="text-align: right;"> POSTED AUG 1976 </div>																															

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION					
1. SERIAL NUMBER		2. NAME (LAST FIRST-MIDDLE)			
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
REASSIGNMENT		01 23 76			
6. FUNDS		7. FAN AND NSCA		8. CSC OR OTHER LEGAL AUTHORITY	
V TO V		V TO CF		.6230 0118 0002	
CF TO V		CF TO CF			
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION			
DDO/CCS		WASH.. D.C.			
11. POSITION TITLE		12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION	
RECORDS ADMIN OF CM		6144		DAC	
14. CLASSIFICATION SCHEDULE (GS, LB, etc)		15. OCCUPATIONAL SERIES		17. SALARY OR RATE	
GS		0344.01		12	
16. REMARKS					
SIGNATURE OR OTHER AUTHENTICATION					
<div style="text-align: right;"> 30 <i>[Signature]</i> </div>					

NAME		GRADE		STEP		SALARY		EFFECTIVE DATE	
		39 115							
OLD SALARY RATE		NEW SALARY RATE		TYPE ACTION					
Grade	Step	Salary	Effective Date	Grade	Step	Salary	Effective Date	SI	ADJ
GS 12	3	20,678	11/24/74	GS 12	4	21,324	11/23/75		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY		THE FOLLOWING IS OF ACCEPTABLE LEVEL OF COMPETENCE							
SIGNATURE		DATE 12 Sept 1975							
<input checked="" type="checkbox"/> NO EXCESS (WOP) <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> (WOP STATUS AT END OF WAITING PERIOD)									
CLERK'S INITIALS									
FORM 560E Use previous editions		PAY CHANGE NOTIFICATION						(4-511)	

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11541 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1976

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
	39 115	V	GS 12	4	\$22,485

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11883 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 12 OCTOBER 1975

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
WOODS JAMES S	010032	39 115	V	GS 12 3	\$20,678

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)	
3 NATURE OF PERSONNEL ACTION		4 EFFECTIVE DATE	
PROMOTION		11 24 74	
5 CATEGORY OF EMPLOYMENT		REGULAR	
6 FUNDS		7 FAN AND NSCA	
X V TO V CF TO V		5230 0121 0002	
		8 CSC OR OTHER LEGAL AUTHORITY	
		50 USC 403	
9 ORGANIZATIONAL DESIGNATIONS		10 LOCATION OF OFFICIAL STATION	
DDC/CCS REGISTRY		WASH., D.C.	
11 POSITION TITLE		12 POSITION NUMBER	
RECORDS ADMIN. SE. CH.		0081	
13 SERVICE DESIGNATION		DAC	
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)		15 OCCUPATIONAL SERIES	
GS		0344.01	
16 GRADE AND STEP		17 SALARY OR RATE	
12 3		19083	
18 REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL:			
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING	22 STATION CODE
22	10	NUMERIC ALPHABETIC	75043
23 INTEGRITY CODE	24 HIGHS CODE	25 DATE OF BIRTH	26 DATE OF GRADE
1		11 24 74	11 24 74
27 DATE OF LST	28 NTE EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA
11 24 74		1 CSC 2 CUP 3 TCA 4 NONE	COGE
31 SEPARATION DATA CODE	32 Correction / Cancellation Data	33 SECURITY REQ NO	34 SEC
		EOD DATA	
35 VET PREFERENCE	36 SERV COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY
CODE	8 - NONE 1 - 5 PT 2 - 10 PT	MO DA YE	MO DA YE
39 REGU / HEALTH INSURANCE	40 SOCIAL SECURITY NO.	41 PREVIOUS CIVILIAN GOVERNMENT SERVICE	42 LEAVE CAT CODE
CODE	0 - NONE 1 - YES 2 - YES	CODE	CODE
43 FEDERAL TAX DATA	44 STATE TAX DATA	45 FORM EXECUTED	46 FORM EXECUTED
CODE	CODE	1 - YES 2 - NO	1 - YES 2 - NO
SIGNATURE OR OTHER AUTHENTICATION			
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BBG: 19 SEPT 73

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)									
3 NATURE OF PERSONNEL ACTION											
REASSIGNMENT, TRANSFER TO VOUCHERED FUNDS AND DELEGATION OF NSCA											
4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT									
MO DA YR		REGULAR									
09 16 73											
6 FUNDS		7 FAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY							
X		4230 0121 0002		50 USC 403 J							
9 ORGANIZATIONAL DESIGNATIONS											
10 LOCATION OF OFFICIAL STATION											
DDO/CCS OFFICE OF THE CHIEF RECORDS MANAGEMENT AND REGISTRY SEC WASH., D.C.											
11 POSITION TITLE				12 POSITION NUMBER				13 SERVICE DESIGNATION			
RECORDS ADMIN OF CH				0061				D			
14 CLASSIFICATION SCHEDULE (GGS 18-65)				15 OCCUPATIONAL SERIES				16 GRADE AND STEP			
GS				0344.01				11 6			
17 SALARY OR RATE				18 REMARKS							
16326				W-2 INFO: CIA							
				HOME BASE: SS							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE		20 EMPLOY CODE		21 OFFICE CODING		22 STATION CODE		23 INTEREST CODE		24 PRIORITY CODE	
16		10		35100		GCS		75013		1	
25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LET		28 CORRELATION / CONVERSION DATE		29 SECURITY REQ NO		30 SEX	
MO DA YR		MO DA YR		MO DA YR		MO DA YR		MO DA YR		MO DA YR	
XX XX XX		XX XX XX		XX XX XX		XX XX XX		XX XX XX		XX XX XX	
31 YES PREFERENCE		32 SEPT COMP DATE		33 LONG COMP DATE		34 CAREER CATEGORY		35 REG / HEALTH INSURANCE		36 SOCIAL SECURITY NO	
CODE		MO DA YR		MO DA YR		CODE		CODE		CODE	
1 YES		MO DA YR		MO DA YR		CODE		CODE		CODE	
2 NO		MO DA YR		MO DA YR		CODE		CODE		CODE	
3 NO		MO DA YR		MO DA YR		CODE		CODE		CODE	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEA / CAT CODE				43 FEDERAL TAX DATA			
CODE				CODE				CODE			
1 NO PREVIOUS SERVICE				1 YES				1 YES			
2 NO PREVIOUS SERVICE				2 YES				2 YES			
3 PREVIOUS SERVICE (LESS THAN 3 YRS)				3 YES				3 YES			
4 RETIRE IN SERVICE (MORE THAN 3 YRS)				4 YES				4 YES			
SIGNATURE OR OTHER AUTHENTICATION											
FROM: EUR											
POSTED 9-20-73 [Signature]											

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5325 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11811 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 OCTOBER 1974

NAME

SERIAL ORGN. FUNDS GR-STEP

NEW
SALARY

39 115 V GS 11 6

\$18,061

FOR PURPOSES OF THE FAIR LABOR STANDARDS ACT, AS AMENDED,
YOU ARE DESIGNATED EXEMPT.

EFFECTIVE DATE OF DESIGNATION: 01 MAY 1974.

42300121

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11737 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 OCTOBER 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
	39	115	V	GS 11 6	\$17,116

"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER 11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
		44	750	CF GS 10 7	\$15,331

OF PAY ADJUSTMENT CORRECTED FROM
11777. DATED 12 APR 1974.

SECRET

(When Filled In)

LML: 13 FEB 73

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
PROMOTION						MO DA YR 02 04 73		REGULAR			
A. FUNDS		V TO V		V TO OF		7. Financial Analysis No Chargeable		8. CSC OR OTHER LEGAL AUTHORITY			
		OF TO V		X OF TO OF		3135 1267 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/EUROPEAN DIVISION FOREIGN FIELD											
SUPPORT BRANCH											
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
RECORDS ADM OF						0699		D			
14. CLASSIFICATION SCHEDULE (GS, LE, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0344.01		11 6		16326			
18. REMARKS											
HOME BASE: IS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTERNAL CODE		24. GRADE CODE	
22		10		44750 EUR		36533				3	
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		28. DATE OF BIRTH		29. DATE OF GRADE		30. DATE OF LEI	
MO DA YR		MO DA YR		MO DA YR		MO DA YR		MO DA YR		MO DA YR	
02 03 74		02 04 73		02 04 73		02 04 73		02 04 73		02 04 73	
31. NTE EXPIRY		32. SPECIAL REFERENCE		33. RETIREMENT DATA		34. SECURITY CODE		35. SECURITY REQ MO		36. SEX	
MO DA YR		1		CODE		CODE		CODE		CODE	
02 03 74		81									
37. VET PREFERENCE		38. SERV COMP DATE		39. LONG COMP DATE		40. LEAVE CATEGORY		41. LEGAL/HEALTH INSURANCE		42. SOCIAL SECURITY NO	
CODE		MO DA YR		MO DA YR		CODE		CODE		CODE	
1-NO 2-10 PT 3-10 PT											
43. PREVIOUS CIVILIAN GOVERNMENT SERVICE		44. LEAVE CAT. CODE		45. FEDERAL TAX DATA		46. STATE TAX DATA		47. SOCIAL SECURITY NO		48. STATE CODE	
CODE		CODE		CODE		CODE		CODE		CODE	
1-NO PREVIOUS SERVICE 2-NO BEAR IN SERVICE 3-BEAR IN SERVICE (LESS THAN 3 YRS) 4-BEAR IN SERVICE (MORE THAN 3 YRS)											
SIGNATURE OF OTHER AUTHENTICATION											
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Use Previous Edition

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"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND
EXECUTIVE ORDER 11637 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE
CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

NAME	SERIAL	ORGN.	FUNDS	GR	STEP	NEW SALARY
		44	750	CP	GS 10 7	\$14,981

23 MAY 1971.

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCP

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS			4. EFFECTIVE DATE MO DA YR 05 30 71
5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS	V TO V C TO V	X C TO C	7. Financial Analysis No. Chargeable 1136 1267 0000
			8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
9. ORGANIZATION DDP/EUR DIVISION FOREIGN FIELD		10. LOCATION OF OFFICIAL STATION	
SUPPORT BRANCH			
11. POSITION TITLE RECORDS ADM OF		12. POSITION NUMBER 0699	13. SERVICE DESCRIPTION D
14. CLASSIFICATION SCHEDULE (GPO, US, etc.) GS	15. OCCUPATIONAL SERIES 0344.01	16. GRADE AND STEP 10 7	17. SALARY OR RATE 13821
18. REMARKS			
HOME BASE: EUR			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE 20	20. EMPLOY CODE 10	21. OFFICE (NAME) EUR	22. STATION CODE 36533
23. DATE OF BIRTH 05 29 73	24. DATE OF TRANSFER 05 30 71	25. DATE OF BIRTH 05 29 73	26. DATE OF TRANSFER 05 30 71
27. DATE OF BIRTH 05 29 73	28. DATE OF TRANSFER 05 30 71	29. DATE OF BIRTH 05 29 73	30. DATE OF TRANSFER 05 30 71
31. SIGNATURE OF AUTHORITY			
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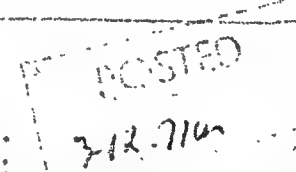
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NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
CHANGE OF FAN				02 18 71		REGULAR					
6. FUNDS		X		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY	
				CF TO V		CF TO CF		1236 1166 0000		50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION							
OJP/EUR DEVELOPMENT COMPLEMENT				WASH., D.C.							
11. POSITION TITLE				12. POSITION NUMBER				13. SERVICE DESIGNATION			
RECORDS ADM OFFICER				9957				D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES				16. GRADE AND STEP		17. SALARY OR RATE	
GS				0344.01				10 7		13b21	
18. REMARKS											
OTHER											
HOME BASE: EUR											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGRITY CODE		24. PRIORITY CODE	
37		16		NUMERIC ALPHABETIC		44997 EUR 75013					
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEL		28. CORRECTION		29. COMPLETION DATE		30. SECURITY REG NO	
										FOD DATA	
31. VET PREFERENCE		32. SERV COMP DATE		33. LONG LUMP DATE		34. CAREER CATEGORY		35. REGU HEALTH INSURANCE		36. SOCIAL SECURITY NO	
37. PREVIOUS CIVILIAN GOVERNMENT SERVICE				38. LEAVE CAT CODE				39. FEDERAL TAX DATA			
40. STATE TAX DATA				41. STATE TAX DATA				42. STATE TAX DATA			
SIGNATURE OF OTHER AUTHENTICATION											
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FORM 11-60
5-60Use Previous
Edition

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FORM 11-60

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND
EXECUTIVE ORDER 11576 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE
CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
	44 997	V		GS. 10 7	\$13,821

ARS: 27 JAN 71

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
OKF									
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)							
REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS-CORRECTION				4. EFFECTIVE DATE MO DA YR 01 10 71		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY	
X		CF TO V		CF TO CF		1234 1186 0000		50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS DDP/EUR DEVELOPMENT COMPLEMENT				10. LOCATION OF OFFICIAL STATION WASH., D.C.					
11. POSITION TITLE RECORDS ADM OFFICER				12. POSITION NUMBER 9997		13. SERVICE DESIGNATION D			
14. CLASSIFICATION-SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0344.01		16. GRADE AND STEP 10 7		17. SALARY OR RATE 13821			
18. REMARKS THIS ACTION CORRECTS FORM 1150 THE EFFECTIVE DATE WHICH READ 12/13/70 TO READ 01/10/71.									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE 58	20. EMPLOY CODE 18	21. OFFICE CODING NUMERIC ALPHABETIC 44397 EUR		22. STATION CODE 75013	23. UTILITY CODE	24. EMPLOY CODE 1	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR
29. NTE EXP RES MO DA YR		30. RETIREMENT DATA 1. CSC 2. CAC 3. FICA 4. NONE		31. SEPARATION DATA CODE	32. CORRECTION/CONCILIATION DATA TYPE MO DA YR 16 12 13 70	33. SECURITY REQ PND E.O.D. DATA		34. SEA	
35. VET PREFERENCE CODE 1. NONE 2. 5 PF 3. 10 PF		36. SERV COMP DATE MO DA YR		37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CODE 1. YES 2. NO		39. FEGLI-HEALTH INSURANCE CODE 1. YES 2. NO		40. SOCIAL SECURITY NO
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 1. NO PREVIOUS SERVICE 2. NO PREVIOUS SERVICE 3. PREVIOUS SERVICE (LESS THAN 2 YRS) 4. PREVIOUS SERVICE (MORE THAN 2 YRS)				42. LEAVE CAT CODE	43. FEDERAL TAX DATA CODE 1. YES 2. NO		44. STATE TAX DATA CODE 1. YES 2. NO		
SIGNATURE OR OTHER AUTHENTICATION									
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FORM 1150
5-68 May 6-73Use Previous
Edition

SECRET

BBG

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

SECRET

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AHS: 11 DEC 70

CCF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS			
4. EFFECTIVE DATE MO DA YR 12 13 70		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V CF TO V X		7. Financial Analysis No. Chargeable 1236 1186 0000	
8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS DCP/EUR DEVELOPMENT COMPLEMENT		10. LOCATION OF OFFICIAL STATION WASH., D.C.	
11. POSITION TITLE RECORDS ADM OFF		12. POSITION NUMBER 9997	
13. SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0344.01	
16. GRADE AND STEP 10 7		17. SALARY OR RATE 13041	
18. REMARKS OTHER HOME BASE: EUR			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE 16	20. EMPLOY CODE 18	21. OFFICE CODING NUMERIC 44997 ALPHABETIC EUR	22. STATION CODE 75013
23. DATE EMPLOYED MO DA YR	24. SPECIAL REFERENCE 1. CODE 2. DIA 3. PIA 4. PIA	25. RETIREMENT DATA CODE	26. SEPARATION DATA CODE
27. DATE OF BIRTH MO DA YR	28. DATE OF GRADE MO DA YR	29. DATE OF LET MO DA YR	30. SECURITY YES NO
31. NET PREFERENCE CODE 1. YES 2. NO	32. SERV COMP DATE MO DA YR	33. LONG COMP DATE MO DA YR	34. CAREER CATEGORY CODE 1. YES 2. NO
35. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE (LESS THAN 3 YRS.) 4. BREAK IN SERVICE (MORE THAN 3 YRS.)	36. LEAVE CAT CODE	37. FEDERAL TAX DATA CODE 1. YES 2. NO	38. STATE TAX DATA CODE 1. YES 2. NO
39. SIGNATURE OR OTHER AUTHENTICATION			

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FORM 150 1150
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RECORDING AND
CLASSIFICATION

(When Filled In)

For

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP MONTHS	
				44 525		CF			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADD
GS 10	6	\$12,679	07/28/68	GS 10	7	\$13,041	07/26/70		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE <i>[Signature]</i>						DATE <i>6/23/70</i>			
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CER'S INITIALS <i>[Initials]</i>				AUDITED BY <i>[Signature]</i>					
FORM 7-66 560 E Use previous editions				PAY CHANGE NOTIFICATION				<i>[Signature]</i> (4-81)	

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 28 DECEMBER 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
		44	525	CF GS 10 6	\$12,679

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 213 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
		44	525	CF GS 10 6	\$11,942

SECRET

(When Filled In)

4 NOV 68

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT		11 04 68	REGULAR
6. FUNDS	7. Financial Analysis No. Chargeable	8. CSC OR OTHER LEGAL AUTHORITY	
V TO V CF TO V	V TO CF CF TO CF	50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
DDP/EUR FOREIGN FIELD			
SUPPORT BRANCH REGISTRY SECTION			
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
RECORDS ADM OF		0254	D
14. CLASSIFICATION SCHEDULE (OS, IS, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0344.01	10 6	10847
18. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE
37	10	44525 EUR	21025
23. INT. EXPIRES	24. SPECIAL REFERENCE	25. RETIREMENT DATA	26. SEPARATION DATA CODE
11 03 70	83		
27. VET PREFERENCE	28. SERV. COMP. DATE	29. LONG. COMP. DATE	30. CAREER CATEGORY
31. PREVIOUS CIVILIAN GOVERNMENT SERVICE	32. LEAVE CAT. CODE	33. FEDERAL TAX DATA	34. STATE TAX DATA
SIGNATURE OR OTHER AUTHENTICATION			
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FORM 5-66 1150
May 10-67Use Previous
Edition

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GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

VO: 16 AUG 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DCF

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
PROMOTION		07 28 68	REGULAR
6. FUNDS	V TO V CF TO V	V TO CF CF TO CF	7. Financial Analysis No. Chargeable
	X		9137 1487 0000
9. ORGANIZATIONAL DESIGNATIONS		8. CSC OR OTHER LEGAL AUTHORITY	
DDP/FE FOREIGN FIELD FE/VNO VIET NAM STATION INTELLIGENCE DIVISION COLLATION BRANCH CURRENT INTELLIGENCE SECTION BIOGRAPHIC UNIT		50 USC 403 J	
10. LOCATION OF OFFICIAL STATION		SAIGON, SOUTH VIET NAM	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
RECORDS ADMIN OF		4984	D
14. CLASSIFICATION SCHEDULE (OS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0344.01	10 6	10847
18. REMARKS			
RECORDS ADMIN OFFICER OCCUPYING 10 GENERAL POSITION			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE
22	10	NUMERIC 45500 ALPHABETIC FE	77205
23. DATE OF BIRTH	24. DATE OF GRADE	25. DATE OF LET	26. DATE OF BIRTH
07 28 68	07 28 68	07 28 68	07 28 68
27. DATE OF BIRTH	28. DATE OF GRADE	29. DATE OF LET	30. DATE OF BIRTH
07 28 68	07 28 68	07 28 68	07 28 68
31. SECURITY RTO NO	32. SECURITY RTO NO	33. SECURITY RTO NO	34. SECURITY RTO NO
35. VET PREFERENCE	36. SERV. COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY
39. PREVIOUS CIVILIAN GOVERNMENT SERVICE	40. LEAVE CAT. CODE	41. FEDERAL TAX DATA	42. STATE TAX DATA

SIGNATURE OR OTHER AUTHENTICATION

POSTED
16/6/68

1150
10-67

Use Previous
Edition

SECRET

FWD

Excluded from automatic
downgrading and
declassification

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-206 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 6 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

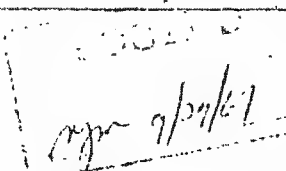
NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
	45	500	CF	GS 09 7	\$ 9,668	\$10,154

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
	45	500	CF	GS 09 7	\$ 9,202	\$ 9,668

SECRET
(When Filled In)

OCS 05/31/67										NOTIFICATION OF PERSONNEL ACTION														
1 SERIAL NUMBER					2 NAME (LAST-FIRST MIDDLE)																			
3 NATURE OF PERSONNEL ACTION										4 EFFECTIVE DATE					5 CATEGORY OF EMPLOYMENT									
REASSIGNMENT										MO. DA YE 05 21 67														
6 FUNDS					V TO V					V TO CF					7 FINANCIAL ANALYSIS NO. CHARGEABLE					8 CSC OR OTHER LEGAL AUTHORITY				
					CF TO V					X CF TO CF					7137 1487 0000									
9 ORGANIZATIONAL DESIGNATIONS										10 LOCATION OF OFFICIAL STATION														
DDP&F DIVISION										SAIGON, SOUTH VIET NAM														
11 POSITION TITLE										12 POSITION NUMBER					13 CAREER SERVICE DESIGNATION									
RECORDS ADMIN OF										4965					D									
14 CLASSIFICATION SCHEDULE (GS, LS, etc.)					15 OCCUPATIONAL SERIES					16 GRADE AND STEP					17 SALARY OR RATE									
GS					0344,01					09														
18 REMARKS																								
SIGNATURE OR OTHER AUTHENTICATION																								
																								

MRT: 9 DEC 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 010032		2. NAME (LAST-FIRST-MIDDLE) WOODS JAMES S	
3. NATURE OF PERSONNEL ACTION DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM		4. EFFECTIVE DATE MO: DA: YR: 12 18 66	5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V X	V TO CF CF TO CF	7. COST CENTER NO. CHARGEABLE 7137 1566 0000	8. CSC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203
9. ORGANIZATIONAL DESIGNATIONS DDP/FE		10. LOCATION OF OFFICIAL STATION Saigon, South Viet Nam	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP 09
17. SALARY OR RATE			
18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE
23. INTEGRATE CODE	24. HOURS CODE	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR
27. DATE OF LEI MO DA YR	28. BTE RATES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1 - CSC 2 - FICA 3 - NONE 2
31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	33. SECURITY REQ NO	34. SEX
35. VET. PREFERENCE CODE 0 - NONE 1 - 5 PT 2 - 10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP. DATE MO DA YR	38. CAREER CATEGORY CAR YES PROV YES
39. FEGLI / HEALTH INSURANCE CODE 0 - WAIVER 1 - YES	40. SOCIAL SECURITY NO.	41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)	42. LEAVE CAT. CODE
43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTION 4 1 - YES 2 - NO	44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPT STATE CODE 1 - YES 2 - NO	45. SIGNATURE OR OTHER AUTHENTICATION	

FORM 11 62 1150

Use Previous
Edition

SECRET

POSTED
12-14-66

12-14-66
12-14-66
12-14-66

(When Filled In)

MRT: 8 DEC 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						MO. DA. YR.		REGULAR			
						12 08 66					
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
		CF TO V		CF TO CF		7137 1487 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/FE FOREIGN FIELD FE/VNC - VIETNAM STATION EXECUTIVE OFFICE REGISTRY SECTION						SAIGON, SOUTH VIET NAM					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
RECORDS ADMIN OF						4127		D			
14. CLASSIFICATION SCHEDULE (GS, LW, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0344.01		09 7		9262			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. INDUSTRY CODE	
37		10		NUMERIC ALPHABETIC		77205				3	
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		28. CORRECTION/COMPLETION DATA		29. SECURITY REQ NO.		30. SEX	
MO. DA. YR.		MO. DA. YR.		MO. DA. YR.		TYPE MO. DA. YR.		EOD DATA			
31. VET. PREFERENCE		32. SERV. COMP. DATE		33. LONG. COMP. DATE		34. CAREER CATEGORY		35. FEET/1/ HEALTH INSURANCE		36. SOCIAL SECURITY NO.	
CODE		MO. DA. YR.		MO. DA. YR.		CAN. DESV. CODE		CODE		CODE	
0 - NONE 1 - 5 PT. 2 - 10 PT.						SPON. TEMP.		CODE		CODE	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA	
CODE				CODE		CODE				CODE	
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)				0 - NONE 1 - YES 2 - NO		0 - NONE 1 - YES 2 - NO				0 - NONE 1 - YES 2 - NO	
SIGNATURE OR OTHER AUTHENTICATION											
FOSTERED 12-12-66											

FORM 11-62 1150

Use Previous Edition

SECRET

14-01
When Filled In

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
	45 380	CF	GS 09 7		\$ 9,003	\$ 9,262

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
				45 380 CF						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last EM Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADI
GS-09	6	88719	11/07/65	GS-09	7	89003	03/27/66			
8. Remarks and Authentication										
QUALITY STEP INCREASE										
/s/ Bennett D. Roberts Date: 31 March 1966										
PAY CHANGE NOTIFICATION										

Form 560
9-61

Obtain from
Edition

(4-31)

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
				45 380 CF						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last EM Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADI
GS-09	6	88719	11/07/65	GS-09	7	89003	03/27/66			
8. Remarks and Authentication										
QUALITY STEP INCREASE										
/s/ Bennett D. Roberts Date: 31 March 1966										

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 2 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUND	GR-STEP	OLD SALARY	NEW SALARY
	45 380	CF	GS	09 3	\$ 8,200	\$ 8,495

12

10F

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours	
				45 380 CF			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date
		8495				8749	
GS	09 3	8495	11/10/63	GS	09 6	8749	11/07/65
7. Remarks and Authorization							
<p>✓ NO EXCESS LWOP</p> <p>✓ IN PAY STATUS AT END OF WAITING PERIOD</p> <p>✓ LWOP STATUS AT END OF WAITING PERIOD</p> <p>CLERKS INITIALS _____ AUDITED BY _____</p> <p>I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.</p> <p>SIGNATURE: _____ DATE: 11 October 65</p>							
PAY CHANGE NOTIFICATION							

Form 9-61 560 Circular 11-65 1-511

SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE AND STEP AS INDICATED IN CHART BELOW.

[illegible]

SECRET
(When filled in)

NOTIFICATION OF PERSONNEL ACTION

ADPD 09/18/64

1 SERIAL NUMBER 2 NAME (LAST FIRST MIDDLE)

3 NATURE OF PERSONNEL ACTION

REASSIGNMENT

4 EFFECTIVE DATE

09 18 64

5 CATEGORY OF EMPLOYMENT

6 FUNDS

V TO V

V DP 0

0 TO V

X

0 DP 0

7 COST CENTER NO. CHARGEABLE

5137 1966 0000

8 CSC OR OTHER LEGAL AUTHORITY

9 ORGANIZATION (OFFICE/SECTION)

DDP/FE DIVISION

CEN REQ REC

10 LOCATION OF OFFICIAL STATION

11 POSITION TITLE

INTEL ANALYST CM

12 POSITION NUMBER

4466

13 CAREER SERVICE DESIGNATION

D

14 CLASSIFICATION SYMBOLS (GS, LB, etc.)

GS

15 OCCUPATIONAL SERIES

0132.39

16 GRADE AND STEP

09

17 SALARY OR RATE

18 REMARKS

SIGNATURE OF OTHER AUTHENTICATION

POSTED

9/24/64 MVR

Form 1120
1-63 MAG 1-63

Use Previous
Edition

SECRET

1-63 P 1
Excludes from automatic
downgrading and
declassification

(When Filled In)

SECRET
(When Filled In)

AES: 16 MARCH 61

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST-MIDDLE)									
3. NATURE OF PERSONNEL ACTION REASSIGNMENT & TRANSFER TO CONFIDENTIAL FUNDS*						4. EFFECTIVE DATE MO DA YR 03 19 61		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		V TO V		X		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY	
		CF TO V				CF TO CF		1137 7351 1000		50 USC 403	
9. ORGANIZATIONAL DESIGNATIONS DDP FE OFFICE OF THE CHIEF CENTRAL REGISTRY AND RECORDS SEC						10. LOCATION OF OFFICIAL STATION					
11. POSITION TITLE INTEL ANALYST GEN						12. POSITION NUMBER 3061		13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, WD, etc.) GS			15. OCCUPATIONAL SERIES 0132.36			16. GRADE AND STEP 09 3		17. SALARY OR RATE 6765			
18. REMARKS *SUBJECT TO APPROVED MEDICAL CLEARANCE PRIOR TO BEING SENT OVERSEAS.											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 20	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 56380 FE		22. STATION CODE 37587	23. INTERSEE CODE 3	24. HOURS	25. DATE OF BIRTH	26. DATE OF GRADE		27. DATE OF LES	
28. VET EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO	
								EOD DATA			
34. VET PREFERENCE		35. SERV. COMP. DATA		36. LONG COMP. DATE		37. MIL SERV. CREDIT/ACD		38. FEGLI / HEALTH INSURANCE		39. SOCIAL SECURITY NO.	
40. PREVIOUS GOVERNMENT SERVICE DATA				41. LEAVE CAT		42. FEDERAL TAX DATA		43. STATE TAX DATA			
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 03/22/61 RK </div>											

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI
MEMORANDUM DATED 1 AUGUST 1966, SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
	45 380	CF	05 09 5		\$ 7,975	\$ 7,950

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours	
				56 380 CF 11			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Lea EN Date	Grade	Step	Salary	Effective Date
GS 09	4	\$ 7,390	11/12/61	GS 09	5	\$ 7,975	11/10/62
7. TYPE ACTION							
8. Remarks and Authentication / / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE. SIGNATURE: <i>[Signature]</i> DATE: <i>[Date]</i> PAY CHANGE NOTIFICATION							

Form 560

Obsolete Form
Edition

(4-51)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND
DCI MEMORANDUM DATED 1 AUGUST 1964, SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 13 OCTOBER 1962

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
	5438	CF	05 04		\$ 6,950	\$ 7,280

6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA	YR				MO	DA	YR
GS 09	2	\$ 6,600	11	15	59	GS 09	2	\$ 6,745	11	13	60

TO BE COMPLETED BY THE OFFICE OF COMPTROLLER

8. CHECK ONE ☒ **NO EXCESS LWOP** ☐ **EXCESS LWOP**
 IF EXCESS LWOP, CHECK FOLLOWING:
☐ **IN PAY STATUS AT END OF WAITING PERIOD**
☐ **IN LWOP STATUS AT END OF WAITING PERIOD**

9. NUMBER OF HOURS LWOP _____
 10. INITIALS OF CLERK _____ 11. AUDITED BY _____

TO BE COMPLETED BY THE OFFICE OF PERSONNEL

12. TYPE OF ACTION
☐ P.O.I. ☐ L.S.I. ☐ PAY ADJUSTMENT

13. REMARKS _____

14. AUTHENTICATION
 [Signature] **W.K.**

PAY CHANGE NOTIFICATION

FORM 560 OBSOLETE PREVIOUS EDITION REPLACES FORM 560a AND 560b. **SECRET** OFFICIAL PERSONNEL FOLDER (4)

SECRET
(When Filled In)

1. Serial No.	2. Name	3. Cost Center Number	4. LWOP Hours
		DDP/FF 11 UV	

5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS	09	3	\$ 6,765	11/13/60	GS	4	\$ 6,930	11/12/61		

8. Remarks and Authentication
 / / NO EXCESS LWOP
 / / IN PAY STATUS AT END OF WAITING PERIOD
 / / IN LWOP STATUS AT END OF WAITING PERIOD

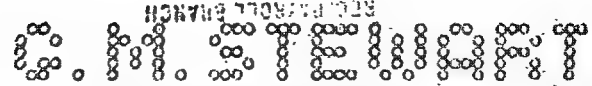
PAY CHANGE NOTIFICATION

FORM 560 OBSOLETE PREVIOUS EDITION REPLACES FORM 560a AND 560b. **SECRET** (4-31)

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD NAME SERIAL ORGN GR-ST OLD SALARY NEW SALARY
 01 [] [] 51 12 GS-09 2 \$ 6,135 \$ 6,600

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME		3. ASSIGNED ORG.		4. FUNDS		5. ALLOTMENT	
				DDP/FE		V-20		-37	
6. OLD SALARY RATE						7. NEW SALARY RATE			
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE
			MO	DA.	YR.				MO DA. YR.
GS 9	1	\$ 5,984	11	16	58	GS 9	2	\$ 6,135	11 15 59
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER									
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP. <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP			
IF EXCESS LWOP, CHECK FOLLOWING:									
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD						10. INITIALS OF CLERK		11. AUDITED BY	
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD									
TO BE COMPLETED BY THE OFFICE OF PERSONNEL									
12. TYPE OF ACTION						13. REMARKS			
<input type="checkbox"/> P.S.I. <input type="checkbox"/> S.S.I. <input type="checkbox"/> PAY ADJUSTMENT									
14. AUTHENTICATION									
SS. W. 24 01 E 24 HONORARY ATTORNEY GENERAL  PAY CHANGE NOTIFICATION									

FORM 560

560. OBSOLETE PREVIOUS EDITION REPLACES FORM 560A AND 560B.

SECRET

OFFICIAL PERSONNEL FOLDER

(4)

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION														
MCM 20 MAR 59														
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vet. Pref.		5. Sex		6. CS - EOD	
						Mo. Da. Yr.			Non-O 5 Pt-1 10 Pt-2		Code		Mo. Da. Yr.	
									1		M 1		04 21 52	
7. SCU		8. CSC Refml		9. CSC Or Other Legal Authority		10. Apmt. Affidav.			11. FEGLI		12. LCD		13. Serv. Group, LEO	
Mo. Da. Yr.		Yes-1 No-2		Code		Mo. Da. Yr.			Yes-1 No-2		Code		Mo. Da. Yr.	
11 12 48		No-2		1		50 USCA 403			1		04 21 52		No-2 2	

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP FE FE/ SUPPORT BRANCH				5161						57557	
16. Dept. - Field		17. Position Title				18. Position No.		19. Serv.		20. Occup. Series	
Dept - 2 USAd - 4 Frgn - 6		Code				3382		GS		0306.01	
21. Grade & Step		22. Salary Or Rate		23. SO		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
09 1		\$ 5985		DI		Mo. Da. Yr. 11 16 50		Mo. Da. Yr. 11 15 59		9 3780 55 006	

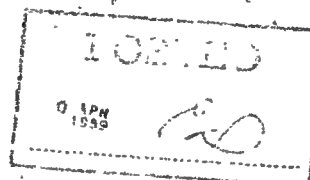
ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
REASSIGNMENT TRANSFER TO VOUCHERED FUNDS		01		03 22 59		REGULAR		01			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP FE OFFICE OF THE CHIEF SECRETARIAT				5112		WASH., D. C.				75013	
33. Dept. - Field		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series	
Dept - 2 USAd - 4 Frgn - 6		Code				2461		GS		0306.01	
38. Grade & Step		39. Salary Or Rate		40. SO		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
09 1		\$ 5985		DI		Mo. Da. Yr. 11 16 50		Mo. Da. Yr. 11 15 59		9 3700 20 001	

44. Remarks



SECRET
(When released to)

NOTIFICATION OF PERSONNEL ACTION														
MCM 14 NOV 58														
1. Serial No.		2. Name (Last-First-Middle)			3. Date Of Birth			4. Vet Pref.		5. Sex		6. CS - EOD		
					Mo. Da. Yr.			None-0 5 Pt-1 10 Pt-9		Code		Mo. Da. Yr.		
								1		M 1		04 21 52		
7. SCD		8. CSC Retmt.		9. CSC Or Other Legal Authority			10. Apmt. Affidav.		11. FEGLI		12. LCD		13. Ill. Serv. Credit, Lda	
Mo. Da. Yr.		Yes-1 No-2		Code			Mo. Da. Yr.		Yes-1 No-2		Code		Mo. Da. Yr.	
11 12 48		No-2		1 50 USCA 403 J					04		21 52		No-2 2	

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP FE BRANCH 3				5161						57557	
ADMIN SEC											
16. Dept. Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dept - 1 USfld - 3 Frpn - 5		Code		RECORDS MGMT ANALYST		3382		GS		0306.01	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
07 4		\$ 5430		01		Mo. Da. Yr. 04 10 55		Mo. Da. Yr. 04 06 58		8 3780 55 006	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
PROMOTION		30		11 16 58		REGULAR		01			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP FE FE SUPPORT BRANCH				5161						57557	
33. Dept. Field				34. Position Title		35. Position No.		36. Serv.		37. Occup. Series	
Dept - 1 USfld - 3 Frpn - 5				Code		RECDS MGMT ANAL		3382		GS 0306.01	
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
09 1		\$ 5985		01		Mo. Da. Yr. 11 16 58		Mo. Da. Yr. 11 15 59		9 3780 55 006	

44. Remarks

POSTED

20 NOV
1958

22B

S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE
12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
------	--------	------------	------------	------------

	GS-07-4	\$ 4,930	\$ 5,430	
--	---------	----------	----------	--

GORDON M. STEWART
/S/ DIRECTOR OF PERSONNEL

S E C R E T

S E C R E T

(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME				3. ASSIGNED ORG.		4. PDDTS		5. ALLOTMENT									
						DDP/FE		UV											
6. OLD SALARY RATE						7. NEW SALARY RATE													
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE										
NO.	DA.	YR.	NO.	DA.	YR.	NO.	DA.	YR.	NO.	DA.	YR.								
GS	7		3			\$ 4,795	04	07	57	GS	7		4			\$ 4,930	06	06	58
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER																			
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP													
IF EXCESS LEAVE LWOP, CHECK FOLLOWING:						10. INITIALS OF CLERK													
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD						11. AUDITED BY													
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD																			
TO BE COMPLETED BY THE OFFICE OF PERSONNEL																			
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS													
GRADE	STEP	SALARY	NO.	DA.	YR.	<div style="text-align: right; padding-right: 10px;"> 12205 6005 J.H. 7/14 </div>													
14. AUTHENTICATION																			
<div style="font-size: 2em; opacity: 0.5; position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); pointer-events: none;"> C E </div> <div style="font-size: 1.5em; font-weight: bold; position: absolute; bottom: 10px; left: 10px;"> G. M. STEWART </div>																			

PERIODIC STEP INCREASE - AUTHENTICATION

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

LVL

1. Serial No.			2. Name (Last-First-Middle)			3. Date Of Birth			4. Vol. Prod.			5. Sen			6. CS - EOD		
						Mo. Da. Yr.			None-0 Code			Mo. Da. Yr.			Mo. Da. Yr.		
									5 Pt-1 10 Pt-2			1 1			04 21 52		
7. SCD			8. CSC RcmL			9. CSC Or Other Legal Authority			10. Apmt. Affidav.			11. FEGLI			12. LCB		
Mo. Da. Yr.			Yes-1 No-2			Code			Mo. Da. Yr.			Yes-1 No-2			Code		
XX XX XX			1			50 USCA 403 J						1 04			21 52		
															13. MIL No-2		
															2		

PREVIOUS ASSIGNMENT

14. Organizational Designations			Code			15. Location Of Official Station			Station Code		
DDP FI						WASH., D.C.					
RECORDS INTEGRATION DIV											
ANALYSIS AND OPERATIONS BR											
ANALYSIS SEC											
16. Dept. - Field			17. Position Title			18. Position No.			19. Serv.		
Dept - 1						430.12			GS		
USfld - 3			INTEL ANALYST						0132.35		
Frgh - 5			2								
21. Grade & Step			22. Salary Or Rate			23. SD			24. Date Of Grade		
07 3			\$ 4795			DI			Mo. Da. Yr.		
									25. Pst Due		
									Mo. Da. Yr.		
									26. Appropriation Number		
									S 2309 23		

ACTION

27. Nature Of Action			Code			28. Eff. Date			29. Type Of Employee			30. Separation Data		
REASSIGNMENT TRANSFER						Mo. Da. Yr.								
TO UNVOUCHERED FUNDS			06			09 08 57			REGULAR			.01		

PRESENT ASSIGNMENT

31. Organizational Designations			Code			32. Location Of Official Station			Station Code		
DDP FE											
BRANCH 3											
ADMIN SEC			5161						57557		
33. Dept. - Field			34. Position Title			35. Position No.			36. Serv.		
Dept - 1			RECORDS MGMT ANALYST			3382			GS		
USfld - 3			5						0306.01		
Frgh - 5											
38. Grade & Step			39. Salary Or Rate			40. SD			41. Date Of Grade		
07 3			\$ 4795			DI			Mo. Da. Yr.		
									42. Pst Due		
									Mo. Da. Yr.		
									43. Appropriation Number		
									8 3780 55 006		

44. Remarks
SUBJECT TO APPROVED MEDICAL CLEARANCE PRIOR TO BEING SENT OVERSEAS.

10612
9/6/57

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME		3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT			
				DDP/FI 29		V-20					
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA	YR				MO	DA	YR
7	2	\$ 4,660	04	08	56	7	3	\$ 4,795	04	07	57
REMARKS											
CERTIFICATION											
I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.											
			11 MAR 1957			SIGNATURE OF SU					
PERIODIC STEP INCREASE - CERTIFICATION											

FORM NO. 560
1 MAR, 56

SECRET

PERSONNEL FOLDER (4)

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME		3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT			
				DDP/FI		V-20		2301			
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA	YR				MO	DA	YR
7	2	\$ 4,660	04	08	56	7	3	\$ 4,795	04	07	57
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP IF EXCESS LEAVE LWOP, CHECK FOLLOWING: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD											
9. NUMBER OF HOURS LWOP						10. INITIALS OF CLERK					
11. AUDITED BY											
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	MO	DA	YR						
14. AUTHENTICATION											
PERIODIC STEP INCREASE - AUTHENTICATION											

FORM NO. 560b
1 MAR, 56

SECRET

PERSONNEL FOLDER (4)

INFORMATION FROM: CHIEF, FINANCE DIVISION

ATTENTION: Payroll Section

SUBJECT: Change in Assignment Request Designation

Personal Services of

1. The Division request that copy of personal services of employee be changed effective with the old assignment and to new

FROM ARGENTINE 6-3712-55-026

TO ARGENTINE 6-2302-03

2. When this change is completed it is requested that a copy of this request be sent to the Division of Finance, Buenos Aires, with the following information:

BT 70P

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

610

1. NAME (MR - MISS - MRS - ONE GIVEN NAME, INITIALS AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
				22 August 1956
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
REASSIGNMENT 56		26 Aug 1956	50 USCA 403 J	
FROM		TO		
BW-430.02		Intel Analyst BW-430.12		
		GS-0132.35-7 \$4660.00 per annum		
		DDP/71 Records Integration Division Analysis & Operations Branch Analysis Section		
		Washington, D. C.		
11. HEADQUARTERS		2		
12. FIELD OR DEPT'L		1		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> 5-PT. <input type="checkbox"/> 10 POINT <input type="checkbox"/>		NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/>		
15. APPROVATION		16. DATE OF APPOINT. (SEE AFFIDAVIT)		
FROM: 7-239-83		17. SUBJECT TO C. S. RETIREMENT ACT (YES NO)		
TO: Rome 750-13		18. DATE OF APPOINT. (SEE AFFIDAVIT)		
REMARKS:		19. LEGAL RESIDENCE		
3 DEC 04/21/52		<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED		
		STATE:		

POSTED
8/29/56 RAB

ENTRANCE PERFORMANCE RATING:

Director of Personnel

4. PERSONNEL FOLDER COPY

U. S. GOVERNMENT PRINTING OFFICE: 1955-379847

um 8/28/56

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

171

1. NAME (MR - MRS - MISS - ONE GIVEN NAME, INITIAL(S) AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
				2 Jul 1956
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Resignation		15 Jul 1956	50 USCA 403 J	
FROM		TO		
10 (CI) HVT-583.03 GS-0136.33-7 \$4660.00 per annum DDP/VI Branch 1 Records Integration Branch Personality Files Section		8. POSITION TITLE Intel Analyst HVT-430.02 GS-0132.33-7 \$4660.00 per annum DDP/VI Records Integration Division Analysis & Operations Branch Analysis Section 410823 Washington, D. C.		
9. SERVICE, SERIES, GRADE, SALARY		10. ORGANIZATIONAL DESIGNATION		
11. HEADQUARTERS		12. FIELD OR DEPT'L		
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> 5-PT <input type="checkbox"/> 10 POINT <input type="checkbox"/>		NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/>		
15. SEC 14		16. APPROPRIATION		
W FROM: 7-3740-55-056 TO: 7-6309-23		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes		
18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)		19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:		
20. REMARKS:				
<p style="text-align: center;">POSTED</p> <p style="text-align: center;">2/19/56</p> <p style="text-align: center;">"Transfer TO Vouchered funds FROM Unvouchered funds."</p> <p style="text-align: center;">3 BUD 04/21/52</p> <p style="text-align: center;">Director of Personnel</p> <p style="text-align: center;">4. PERSONNEL FOLDER COPY</p>				

SECRET

STANDARD FORM 52
 PREPARED BY THE
 U. S. CIVIL SERVICE COMMISSION
 JOINTLY WITH - FEDERAL PERSONNEL
 MANUAL CHAPTER 11

REQUEST FOR PERSONNEL ACTION

UNCLASSIFIED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 68 and 7 unless otherwise instructed.
 If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Mrs., Miss - One given name, initials, and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
			5 May 56
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
Reassignment			
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: 17 JUN 1956	
Change in Title and Service Number			

FROM - Ops Off (CE) GS-0136.52-7 DDP/FE	BFF 583.05-7 4660	A. POSITION TITLE AND NUMBER	TO - IO-CI GS-0136.53-7 DDF/FE	BFF 583.05-7 4660
Records Integration Branch Personality Files Section		B. SERVICE GRADE AND SALARY	Branch 1 - Records Integration Branch Personality Files Section	
		C. ORGANIZATIONAL DESIGNATIONS		
		D. HEADQUARTERS		
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL SD:DI	

A. REMARKS (Use reverse if necessary)

T/O Changes

B. REQUEST	
Signature: [Signature]	Title: FJ/cm 21 May 56
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)	
Ex 8761	

13. VETERAN PREFERENCE		14. POSITION CLASSIFICATION ACTION		SD:DI
GRADE	WHEN OTHER & PT	NEW	VICE	
15. APPROPRIATION		17. SUBJECT TO C & B RETIREMENT ACT (YES-NO)	18. DATE OF APPOINT- MENT AFFIDAVITS (ACCESSIONS ONLY)	19. LEGAL RESIDENCE
FROM: 6-3740-55-096	TO: SPM	Yes		<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: D.C.

20. STANDARD FORM 50 REMARKS

IO-10-1-221-
2 JUN 1956

USED IN LIEU OF SF50
 NOT IN LIEU OF PERSONNEL
 ACTION

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL OR FOS CONTROL	2084	21 May	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.		21 May 56	
E.			
APPROVED BY: [Signature] SECRET 21 May 56			

PERIODIC STEP INCREASE CERTIFICATION

CONFIDENTIAL

(When Filled In)

U S GOVERNMENT PRINTING OFFICE 1964-920020

1. Agency and organizational designation						2. Payroll period		3. Block No. UV		4. Slip No.	
5. Employee's name (and social security account number when appropriate)						6. Grade and salary GS-7 \$4525.00					
PAYROLL CHANGE DATA											
	BASS PAY	OVERTIME		GROSS PAY	RET.	FEDERAL TAX	BOND	F. L. C. A.	STATE TAX	GROUP LIFE INS.	NET PAY
7. Previous amount	1000										
8. New amount	1000										
9. Pay this period	1000										
10. Remarks AED DIVISION						11. Appropriation(s) FE/7			12. Prepared by sfu 1/10		
									13. Audited by		
<input checked="" type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase											
14. Effective date 8 Apr 56	15. Date last equivalent increase 10 Apr 55	16. Old salary rate \$4525.00	17. New salary rate \$4660.00	18. Performance/merit/evaluation, or other SERVICE AND CONDUCT ALL SATISFACTORY (Signature or other authentication)							
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods):				(Check applicable box in case of excess LWOP) <input type="checkbox"/> No excess LWOP, Total excess LWOP <input type="checkbox"/> Excess LWOP							
STANDARD FORM NO. 11266-Rev 52 Form prescribed by Comp. Gen., U. S. October 26, 1954, General Regulations No. 102											

CONFIDENTIAL

PAYROLL CHANGE SLIP — PERSONNEL COPY

sfu

S-E-C-R-E-T

COMBINED AIRCRAFT ACTION IN LIEU OF SF-52
CHANGE OF SERVICE DESIGNATION
Effective Date - 22 April 1950

	<u>Name</u>	<u>Grade</u>	<u>D to DI</u>	<u>Name</u>	<u>Grade</u>
<u>FE</u>		12 12 11 07 09	<u>NEA</u>		12
			<u>FI</u>		07 07
<u>EE</u>		12			
<u>SR</u>		07 11			
			<u>D to DS</u>		
<u>WE</u>		05			
			<u>D to DP</u>		
<u>HE</u>		07			

RM-52-1-1 by J. S. [Signature]
17 April 1950

S-E-C-R-E-T

STANDARD FORM 52
FORM 52-1 (Rev. 1-54)
U.S. CIVIL SERVICE COMMISSION
JANUARY 1954 - PERSONNEL PERSONNEL
BUREAU, OFFICE OF

SECRET
SECRET

UNFOUCHERED

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr - Miss - Mrs - One given name, initial(s), and surname)		2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
				21 Feb 54
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)			6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
Promotion				
8. POSITION (Specify whether establish, change grade or title, etc.)			B. APPROVED: <i>Paul H. [unclear]</i> <i>APR 10 1955</i>	
FROM - IO (FI) BFF 602.02-5 GS-0136.51-45 \$3535.00 p/a DDP/FE Intelligence Division Positive Intelligence Branch UNCONV. WARF. DIV.		9. POSITION TITLE AND NUMBER 10. SERVICE, GRADE, AND SALARY 11. ORGANIZATIONAL DESIGNATIONS 12. HEADQUARTERS	TO - IO (FI) BFF 602.02-7 GS-0136.51-47 \$4405.00 p/a Same Same Same Same RECORDS INFORMATION BR. PERSONNEL ROSTER SECTION	
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		

A. REMARKS (Use reverse if necessary)
Attached herewith are Job Description, Dispatch, and DD/P Personnel Data Sheet.

13. VETERAN PREFERENCE NONE <input type="checkbox"/> MAIL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> 14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> REE <input type="checkbox"/> 1A <input type="checkbox"/> 1B <input type="checkbox"/> 1C <input type="checkbox"/> 1D <input type="checkbox"/> 1E <input type="checkbox"/> 1F <input type="checkbox"/> 1G <input type="checkbox"/> 1H <input type="checkbox"/> 1I <input type="checkbox"/> 1J <input type="checkbox"/> 1K <input type="checkbox"/> 1L <input type="checkbox"/> 1M <input type="checkbox"/> 1N <input type="checkbox"/> 1O <input type="checkbox"/> 1P <input type="checkbox"/> 1Q <input type="checkbox"/> 1R <input type="checkbox"/> 1S <input type="checkbox"/> 1T <input type="checkbox"/> 1U <input type="checkbox"/> 1V <input type="checkbox"/> 1W <input type="checkbox"/> 1X <input type="checkbox"/> 1Y <input type="checkbox"/> 1Z <input type="checkbox"/> 1AA <input type="checkbox"/> 1AB <input type="checkbox"/> 1AC <input type="checkbox"/> 1AD <input type="checkbox"/> 1AE <input type="checkbox"/> 1AF <input type="checkbox"/> 1AG <input type="checkbox"/> 1AH <input type="checkbox"/> 1AI <input type="checkbox"/> 1AJ <input type="checkbox"/> 1AK <input type="checkbox"/> 1AL <input type="checkbox"/> 1AM <input type="checkbox"/> 1AN <input type="checkbox"/> 1AO <input type="checkbox"/> 1AP <input type="checkbox"/> 1AQ <input type="checkbox"/> 1AR <input type="checkbox"/> 1AS <input type="checkbox"/> 1AT <input type="checkbox"/> 1AU <input type="checkbox"/> 1AV <input type="checkbox"/> 1AW <input type="checkbox"/> 1AX <input type="checkbox"/> 1AY <input type="checkbox"/> 1AZ <input type="checkbox"/> 1BA <input type="checkbox"/> 1BB <input type="checkbox"/> 1BC <input type="checkbox"/> 1BD <input type="checkbox"/> 1BE <input type="checkbox"/> 1BF <input type="checkbox"/> 1BG <input type="checkbox"/> 1BH <input type="checkbox"/> 1BI <input type="checkbox"/> 1BJ <input type="checkbox"/> 1BK <input type="checkbox"/> 1BL <input type="checkbox"/> 1BM <input type="checkbox"/> 1BN <input type="checkbox"/> 1BO <input type="checkbox"/> 1BP <input type="checkbox"/> 1BQ <input type="checkbox"/> 1BR <input type="checkbox"/> 1BS <input type="checkbox"/> 1BT <input type="checkbox"/> 1BU <input type="checkbox"/> 1BV <input type="checkbox"/> 1BW <input type="checkbox"/> 1BX <input type="checkbox"/> 1BY <input type="checkbox"/> 1BZ <input type="checkbox"/> 1CA <input type="checkbox"/> 1CB <input type="checkbox"/> 1CC <input type="checkbox"/> 1CD <input type="checkbox"/> 1CE <input type="checkbox"/> 1CF <input type="checkbox"/> 1CG <input type="checkbox"/> 1CH <input type="checkbox"/> 1CI <input type="checkbox"/> 1CJ <input type="checkbox"/> 1CK <input type="checkbox"/> 1CL <input type="checkbox"/> 1CM <input type="checkbox"/> 1CN <input type="checkbox"/> 1CO <input type="checkbox"/> 1CP <input type="checkbox"/> 1CQ <input type="checkbox"/> 1CR <input type="checkbox"/> 1CS <input type="checkbox"/> 1CT <input type="checkbox"/> 1CU <input type="checkbox"/> 1CV <input type="checkbox"/> 1CW <input type="checkbox"/> 1CX <input type="checkbox"/> 1CY <input type="checkbox"/> 1CZ <input type="checkbox"/> 1DA <input type="checkbox"/> 1DB <input type="checkbox"/> 1DC <input type="checkbox"/> 1DD <input type="checkbox"/> 1DE <input type="checkbox"/> 1DF <input type="checkbox"/> 1DG <input type="checkbox"/> 1DH <input type="checkbox"/> 1DI <input type="checkbox"/> 1DJ <input type="checkbox"/> 1DK <input type="checkbox"/> 1DL <input type="checkbox"/> 1DM <input type="checkbox"/> 1DN <input type="checkbox"/> 1DO <input type="checkbox"/> 1DP <input type="checkbox"/> 1DQ <input type="checkbox"/> 1DR <input type="checkbox"/> 1DS <input type="checkbox"/> 1DT <input type="checkbox"/> 1DU <input type="checkbox"/> 1DV <input type="checkbox"/> 1DW <input type="checkbox"/> 1DX <input type="checkbox"/> 1DY <input type="checkbox"/> 1DZ <input type="checkbox"/> 1EA <input type="checkbox"/> 1EB <input type="checkbox"/> 1EC <input type="checkbox"/> 1ED <input type="checkbox"/> 1EE <input type="checkbox"/> 1EF <input type="checkbox"/> 1EG <input type="checkbox"/> 1EH <input type="checkbox"/> 1EI <input type="checkbox"/> 1EJ <input type="checkbox"/> 1EK <input type="checkbox"/> 1EL <input type="checkbox"/> 1EM <input type="checkbox"/> 1EN <input type="checkbox"/> 1EO <input type="checkbox"/> 1EP <input type="checkbox"/> 1EQ <input type="checkbox"/> 1ER <input type="checkbox"/> 1ES <input type="checkbox"/> 1ET <input type="checkbox"/> 1EU <input type="checkbox"/> 1EV <input type="checkbox"/> 1EW <input type="checkbox"/> 1EX <input type="checkbox"/> 1EY <input type="checkbox"/> 1EZ <input type="checkbox"/> 1FA <input type="checkbox"/> 1FB <input type="checkbox"/> 1FC <input type="checkbox"/> 1FD <input type="checkbox"/> 1FE <input type="checkbox"/> 1FF <input type="checkbox"/> 1FG <input type="checkbox"/> 1FH <input type="checkbox"/> 1FI <input type="checkbox"/> 1FJ <input type="checkbox"/> 1FK <input type="checkbox"/> 1FL <input type="checkbox"/> 1FM <input type="checkbox"/> 1FN <input type="checkbox"/> 1FO <input type="checkbox"/> 1FP <input type="checkbox"/> 1FQ <input type="checkbox"/> 1FR <input type="checkbox"/> 1FS <input type="checkbox"/> 1FT <input type="checkbox"/> 1FU <input type="checkbox"/> 1FV <input type="checkbox"/> 1FW <input type="checkbox"/> 1FX <input type="checkbox"/> 1FY <input type="checkbox"/> 1FZ <input type="checkbox"/> 1GA <input type="checkbox"/> 1GB <input type="checkbox"/> 1GC <input type="checkbox"/> 1GD <input type="checkbox"/> 1GE <input type="checkbox"/> 1GF <input type="checkbox"/> 1GG <input type="checkbox"/> 1GH <input type="checkbox"/> 1GI <input type="checkbox"/> 1GJ <input type="checkbox"/> 1GK <input type="checkbox"/> 1GL <input type="checkbox"/> 1GM <input type="checkbox"/> 1GN <input type="checkbox"/> 1GO <input type="checkbox"/> 1GP <input type="checkbox"/> 1GQ <input type="checkbox"/> 1GR <input type="checkbox"/> 1GS <input type="checkbox"/> 1GT <input type="checkbox"/> 1GU <input 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APPROPRIATION FROM 6-3740-55-096 TO: Same	16. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes	17. DATE OF APPOINTMENT AFFIDAVIT'S (SUCCESSORS ONLY) STATE: D.C.	18. LEGAL RESIDENCE [] CLAIMED [] PROVED STATE: D.C.
--	--	---	---	--	--

21. STANDARD FORM 50 REMARKS <i>PERMANENT TO [unclear] DIRECTIVE 1955 TO: 11/25</i> <i>4/1/55</i>			
22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. LEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			
F. APP.			

SECRET

STANDARD FORM 52
FORM 52-1 (Rev. 1-1-54)
U. S. GOVERNMENT PRINTING OFFICE
16-50511-1-54-10000
MANUAL, CHAPTER 10

SECRET

2/24/55
Sam

REQUEST FOR PERSONNEL ACTION

UNFOURNISHED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)

2. DATE OF BIRTH

3. REQUEST NO.

4. DATE OF REQUEST

28 Jan 55

5. NATURE OF ACTION REQUESTED:

A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)

Reassignment

6. EFFECTIVE DATE

26 Oct 54

7. C. S. OR OTHER
LEGAL AUTHORITY

B. POSITION (Specify whether establish, change grade or title, etc.)

8. APPROVED:

26 Oct 1954

FROM—

IO (FI)

BFF 602.02-5

GS-0136.51-45 ~~3535.00~~ p/a
3535.

DDP/FE

WARFARE
Division
Personnel Management, Bureau

9. POSITION TITLE AND
NUMBER

10. SERVICE, GRADE, AND
SALARY

11. ORGANIZATIONAL
DESIGNATIONS

12. HEADQUARTERS

TO—

IO (FI)

BFF 602.02-5

GS-0136.51-45 ~~3535.00~~ p/a
3535.

Same

Same

Same

Same

13. FIELD

14. DEPARTMENTAL

15. FIELD OR DEPARTMENTAL

16. FIELD

17. DEPARTMENTAL

18. REMARKS (Use reverse if necessary)

Subject arrived 26 Oct 54 per 5239 of 17 Nov 1954.

19. Officer
(Signature)

20. REQUEST NO.

Signature:

Title:

17 FJCMO 8 Feb 55

(Signature)

8 Feb 55

8 Feb 55

8 Feb 55

8 Feb 55

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8 Feb 55

1. Agency and organizational designations				2. Pay rate		3. Bio-105		4. Bio-106	
5. Account number when documented				6. 03-5 0310					
PAY ROLL CHANGE DATA									
	BASE PAY	OVERTIME	GROSS PAY	RET.	TAX	BOND	F. I. C. A.		NET PAY
7. Previous normal									
8. New normal									
9. Pay this period									
10. Remarks						11. Appropriation(s)		12. Prepared by	
						72-0		JA 4/20/52	
								13. Audited by	
<input checked="" type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other than									
14. Effective date		15. Date last increased		16. This salary rate		17. New salary rate		18. Performance rating is satisfactory or better.	
6/1/52		7/1/52		9/1/52		10/1/52		11/1/52	
19. LWOP date if fill in appropriate space covering LWOP during following period(s):									
<input type="checkbox"/> No excess LWOP Total excess LWOP									
STANDARD FORM 102, 1-22-54—Revised Form prescribed by Comp. Gen., U. S. Nov. 8, 1950, General Regulation No. 102									

PAY ROLL CHANGE SLIP—PERSONNEL COPY

[Signature]

CONFIDENTIAL
CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION Conc. 26 Mar 1954 Jan

1. NAME (USE -- MR., MRS., OR ONE OTHER NAME, INITIAL(S), AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
				16 Apr 1954
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Reassignment		B.O.B. 25 Apr 1954	50 USC 403 j	
FROM		TO		
1. POSITION TITLE 2. SERVICE, SERIES, GRADE, SALARY 3. ORGANIZATIONAL DESIGNATION 4. HEADQUARTERS		10 (VI) EFF 602.02-5 GS-0136-51-5 \$3410.00 per annum EDP/VS Unconventional Warfare Division		
1. ANALYST 2. \$3410.00 per annum 3. \$3410.00 per annum 4. \$3410.00 per annum 5. \$3410.00 per annum 6. \$3410.00 per annum 7. \$3410.00 per annum 8. \$3410.00 per annum 9. \$3410.00 per annum 10. \$3410.00 per annum 11. \$3410.00 per annum 12. \$3410.00 per annum 13. \$3410.00 per annum 14. \$3410.00 per annum 15. \$3410.00 per annum 16. \$3410.00 per annum 17. \$3410.00 per annum 18. \$3410.00 per annum 19. \$3410.00 per annum 20. \$3410.00 per annum 21. \$3410.00 per annum 22. \$3410.00 per annum 23. \$3410.00 per annum 24. \$3410.00 per annum 25. \$3410.00 per annum 26. \$3410.00 per annum 27. \$3410.00 per annum 28. \$3410.00 per annum 29. \$3410.00 per annum 30. \$3410.00 per annum 31. \$3410.00 per annum 32. \$3410.00 per annum 33. \$3410.00 per annum 34. \$3410.00 per annum 35. \$3410.00 per annum 36. \$3410.00 per annum 37. \$3410.00 per annum 38. \$3410.00 per annum 39. \$3410.00 per annum 40. \$3410.00 per annum 41. \$3410.00 per annum 42. \$3410.00 per annum 43. \$3410.00 per annum 44. \$3410.00 per annum 45. \$3410.00 per annum 46. \$3410.00 per annum 47. \$3410.00 per annum 48. \$3410.00 per annum 49. \$3410.00 per annum 50. \$3410.00 per annum 51. \$3410.00 per annum 52. \$3410.00 per annum 53. \$3410.00 per annum 54. \$3410.00 per annum 55. \$3410.00 per annum 56. \$3410.00 per annum 57. \$3410.00 per annum 58. \$3410.00 per annum 59. \$3410.00 per annum 60. \$3410.00 per annum 61. \$3410.00 per annum 62. \$3410.00 per annum 63. \$3410.00 per annum 64. \$3410.00 per annum 65. \$3410.00 per annum 66. \$3410.00 per annum 67. \$3410.00 per annum 68. \$3410.00 per annum 69. \$3410.00 per annum 70. \$3410.00 per annum 71. \$3410.00 per annum 72. \$3410.00 per annum 73. \$3410.00 per annum 74. \$3410.00 per annum 75. \$3410.00 per annum 76. \$3410.00 per annum 77. \$3410.00 per annum 78. \$3410.00 per annum 79. \$3410.00 per annum 80. \$3410.00 per annum 81. \$3410.00 per annum 82. \$3410.00 per annum 83. \$3410.00 per annum 84. \$3410.00 per annum 85. \$3410.00 per annum 86. \$3410.00 per annum 87. \$3410.00 per annum 88. \$3410.00 per annum 89. \$3410.00 per annum 90. \$3410.00 per annum 91. \$3410.00 per annum 92. \$3410.00 per annum 93. \$3410.00 per annum 94. \$3410.00 per annum 95. \$3410.00 per annum 96. \$3410.00 per annum 97. \$3410.00 per annum 98. \$3410.00 per annum 99. \$3410.00 per annum 100. \$3410.00 per annum		11. FIELD 12. DEPARTMENTAL 13. FIELD OR DEPT. 14. FIELD 15. DEPARTMENTAL		
16. VETERAN'S PREFERENCE		17. POSITION CLASSIFICATION ACTION		
16.1 OTHER 16.2 DISAB. 16.3 OTHER		17.1 NEW 17.2 YES 17.3 L.A. 17.4 REAL		
18. APPROPRIATION		19. DATE OF APPOINTMENT AFFIDAVIT		
FROM: 4-239-83 TO: 4-57-0-55-006		19.1 DATE OF APPOINTMENT AFFIDAVIT 19.2 CLAIMED [] 1 MONTH STATE: D. C.		
REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
"Transfer TO Unconventional Warfare Force Vouchered Only."				
J. M. [Signature]				

4. PERSONNEL FOLDER COPY

4/16/54

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR - MISS - MRS - OR OTHER NAME, INITIALS, AND SUFFIX)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
				27 Feb. 94
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Reassignment		28 Feb. 94	50 USCA 603 j	
FROM		TO		
03-132-3		Intel. Analyst BY 609.08		
R I Staff		03-0132-33-1 (\$10.00 per annum)		
8. POSITION TITLE		9. SERVICE, SERIES, GRADE, SALARY		
		03-0132-33-1 (\$10.00 per annum)		
10. ORGANIZATIONAL DESIGNATION		11. HEADQUARTERS		
		R I Division Processing & Records Branch Consolidation Section		
12. FIELD OR DEPTL		13. FIELD OR DEPTL		
FIELD		FIELD		
DEPARTMENTAL		DEPARTMENTAL		
14. VETERAN'S PREFERENCE		15. POSITION CLASSIFICATION ACTION		
NONE WDR OTHER SPT. 16-PONT		NEW VICE L.A. REAL		
X DISAB OTHER		03-VI		
16. SEX	17. RACE	18. APPROPRIATION	19. DATE OF AFFIDAVIT OF RESIDENCE (ACCESSIONS ONLY)	20. LEGAL RESIDENCE
M	W	FROM: 4-2303-23 TO: 03-0132-33-1	Yes	CLAIMED <input type="checkbox"/> PROVED <input type="checkbox"/>
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				

ENTRANCE PERFORMANCE RATING

Deputy Assistant Director for Personnel

4. PERSONNEL FOLDER COPY

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

each

1. NAME (MR., MRS., MISS, OR MS.—GIVEN NAME, INITIAL(S), AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
				5 June 1953
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Promotion		7 June 1953	Sch A-6, 116(b)	
FROM		TO		
Intel. Anal. BV-469.08-4		Same BV-469.08		
GS-132-4 \$3175.00 per annum		GS-132-3 \$3110.00 per annum		
DIR/FI Records Integration Staff Processing & Records Branch Consolidation Section Washington, D.C.		Same Same Same Same Same		
10. ORGANIZATIONAL DESIGNATIONS		11. HEADQUARTERS		
12. FIELD OR DEPT'L		12. FIELD OR DEPT'L		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE WWII OTHER S-PT. 10-POINT DEAD OTHER		NEW VICE L.A. REAL		
X X		CD-FI		
15. SEX RACE		16. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)		17. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)
M H		Yes		18. LEGAL RESIDENCE CLAIMED <input type="checkbox"/> PROVED <input type="checkbox"/> STATE:
19. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
EXTENSION 2027				
ENTRANCE PERFORMANCE RATING				
Chief, Personnel Division				

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS., ONE OF TWO NAME, INITIAL(S), AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
				24 Apr. 53
5. THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT:				
6. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Resignation		26 Apr. 53	Schedule A-6.116(b)	
FROM				
Mail and File Clerk BV-364.00		Inter. Anal. BV-469.00-1		
GS-4-303 \$1175.00 per annum		GS-4-132 Same		
HDP/PI/RI		Same		
Processing and Records Br.		Same		
Consolidation Section		Same		
Washington, D.C.		Same		
12. FIELD OR DEPTL		12. FIELD OR DEPTL		
FIELD		FIELD		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE <input checked="" type="checkbox"/> WW <input type="checkbox"/> OTHER <input type="checkbox"/> 1-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DEAB. OTHER <input type="checkbox"/>		K14 YCE L.A. REAL		
15. SEX		16. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		
M		17. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		
18. RACE		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		
W		20. LEGAL RESIDENCE		
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval. The action may be corrected or annulled.		22. STATE		
Entrance Performance Rating:		23. STATE		
Chief, Personnel Division		24. STATE		

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MRS., MISS, ONE GIVEN NAME, INITIAL(S), AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
				9 Mar. 53
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Reassignment		15 Mar. 53	Schedule A-6.116(b)	
FROM		TO		
File Clerk BY-356		Mail and File Clerk BY-364.00		
GS-4-305 \$3175.00 per annum		GS-4		
DDP/PI/RI		SAME		
Processing and Records Br. File Section		Consolidation Section		
10. ORGANIZATIONAL DESIGNATIONS		11. HEADQUARTERS		
Washington, D.C.				
12. FIELD OR DEPT'L		12. FIELD OR DEPT'L		
FIELD		FIELD		
DEPARTMENTAL		DEPARTMENTAL		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE WWS OTHER 5-PT. 10-POINT		NEW VICE L.A. REAL		
X		X		
15. SEX		16. RACE		17. APPROPRIATION
M		W		FROM 11X2100
				TO 2309-20
				YES
		18. SUBJECT TO C. S. RETIREMENT ACT (FVS-INC)		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)
				20. LEGAL RESIDENCE
				CLAIMED PROVED
				YES
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
ENTRANCE PERFORMANCE RATING				
Chief, Personnel Division				

S-E-C-R-E-T
Security Information

COMBINED PERSONNEL ACTION

Page 9 of 36 pages

Used in lieu of SF-52 and/or SF-50 to document the following types of personnel actions involving no change in grade or salary: (a) Change in title (b) Change of position number (c) Reassignment within Division without series code change (d) Reassignment within Division with series code change. (Note: For action (type d) a SF-50 will be prepared for vouchered positions from information on this form.)

(1) Staff or Division RI (2) Date 17 November 1952 Approved 17 November 1952 (3) Effective Date of Action 7 Dec 1952
FROM TO

(1) NAME	(5) ORG. I.F. & POS. TITLE	(6) SCHEDULE SERIES-Grade	(7) SLOT NOS.	(8) ACTION	(9) ORG. I.F. & POS. TITLE	(10) SCHEDULE SERIES-Grade	(11) SLOT NOS.
	File Clerk	GS-4	X-32.03	A	File Supervisor	GS-305-4	BV-353.01
	File Clerk	GS-4	X-34.02	B	File Clerk	GS-305-4	BV-354.
	File Clerk	GS-4	X-34.	B	File Clerk	GS-305-4	BV-354.01
	File Clerk	GS-4	X-38.02	B	File Clerk	GS-305-4	BV-354.02
	File Clerk	GS-4	X-38.03	B	File Clerk	GS-305-4	BV-354.03
	File Supervisor e Section	GS-5	X-33.	B	File Supvr.	GS-305-5	BV-355.
	File Clerk	GS-4	X-302.22	B	File Clerk	GS-305-4	BV-355.
	File Clerk	GS-4	X-34.03	A	File Supervisor	GS-305-4	BV-357.
	File Clerk	GS-4	X-32.02	B	File Clerk	GS-305-4	BV-358.
	File Clerk	GS-4	X-38.04	B	File Clerk	GS-305-4	BV-358.01
	File Clerk	GS-4	X-34.01	B	File Clerk	GS-305-4	BV-358.02

(12) APPROVED: 50 (13) APPROVED: 50 (P/12) (14) APPROVED: Class & Wage Div.
S-E-C-R-E-T Personnel Div.

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

(ml)

1. NAME (MR—MISS—MRS—ONE GIVEN NAME, INITIALS, AND SURNAME)		2. DATE OF BIRTH		3. JOURNAL OR ACTION NO.		4. DATE	
						14 Aug. '52	
This is to notify you of the following action affecting your employment:							
5. NATURE OF ACTION (USE STANDARD TERM—ACTION)				6. EFFECTIVE DATE		7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Promotion				17 Aug. '52		Schedule 4-6.116(h)	
FROM		TO					
File Clerk I-39.04 GS-3-305 \$2950.00 per annum OSO RI Processing and Records Branch File Section Washington, D.C.		File Clerk I-102.22 GS-4-305 \$3175.00 per annum OSO RI Analysis and Operations Branch Service and Correspondence Section					
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL					
13. VETERAN'S PREFERENCE				14. POSITION CLASSIFICATION ACTION			
NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/>				NEW <input type="checkbox"/> RECLASS. <input type="checkbox"/> 1 A. <input type="checkbox"/> REAL <input type="checkbox"/>			
15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F		16. APPROPRIATION		18. SUBJECT TO C. S. RETIREMENT ACT (YES—NO)		19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	
FROM: 11X2100		TO:				20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:	
21. REMARKS: THIS ACTION IS SUBJECT TO APPLICABLE LAWS, RULES AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELLED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.							
Chief, Personnel Division ENTRANCE EFFICIENCY RATING:				<div style="border: 1px solid black; width: 200px; height: 40px; margin: 0 auto;"></div>			

V.C. 26 March 1952
MED

STANDARD FORM NO. 10 PART 1
4-7000-1000
PREPARED BY
CHAPTER 2 - PERSONNEL MANUAL
U. S. CIVIL SERVICE COMMISSION

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1 NAME (MR. - MISS - MRS. - ONE GIVEN NAME INITIALS AND SURNAME)		2 DATE OF BIRTH		3 JOURNAL OR ACTION NO		4 DATE	
				/ 57		21 Apr. ' 52	
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)							
Accepted Appointment				21 Apr. 1952		Sub. A -- 6,116 (B)	
FROM				TO			
8 POSITION TITLE				File Clerk GS - 3 K39.04			
9 SERVICE, SERIES, GRADE, SALARY				GS - 3 305 \$2950.00 per annum			
10 ORGANIZATIONAL DESIGNATIONS				OSO RI PROCESSING AND RECORDS BRANCH FILE SECTION			
11 HEADQUARTERS				Washington, D.C.			
12 FIELD OR DEPT'L				FIELD			
13. VETERAN'S PREFERENCE				14 POSITION CLASSIFICATION ACTION			
NONE WWI OTHER'S PT. 10 POINT. DISAB. OTHER				NEW VICE I.A. REAL			
15. SEX				16. RACE			
M				W			
17. APPROPRIATION				18. SUBJECT TO C. 3. RETIREMENT ACT (YES--NO)			
FROM: 2123500 TO: 3000				Yes			
19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)				20. LEGAL RESIDENCE			
21 Apr. 1952				STATE: I			
21. REMARKS: THIS ACTION IS SUBJECT TO ALL APPLICABLE LAWS, RULES AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELLED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.							
<p>(39.04)</p> <p>This appointment is subject to a satisfactory trial period of one year.</p> <p>Subject to a satisfactory medical examination.</p> <p>27. 61 Affidavit executed.</p> <p>3445</p> <p>DOE - 06/07/52</p> <p>OSOOD - 04/27/52</p> <p>LCD - 04/21/52</p> <p>22</p>							

4. PERSONNEL FOLDER COPY

CONFIDENTIAL
CLASSIFICATION

FITNESS REPORT

SECTION A

GENERAL INFORMATION

1. EMPLOYEE NUMBER		2. NAME (Last, first, middle)		3. DATE OF BIRTH	4. SEX	5. GRADE	6. SD
					M	12	D
7. OFFICIAL POSITION TITLE			8. OFF. DIV. OR OF ASSIGNMENT		9. ACTION		
RECORDS ADMIN OFF CH			DDO/CCS/REG		HQS		
10. TYPE OF APPOINTMENT				11. TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input checked="" type="checkbox"/> ANNUAL	<input checked="" type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL	
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> OTHER	12. REPORTING PERIOD (FROM-TO)		13. DATE REPORT DUE IN D.P.		
				01 July 76 - 08 July 77		31 July 1977	

SECTION B

QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

NO

SECTION C

PERFORMANCE EVALUATION

U-Unsatisfactory	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.
M-Marginal	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
P-Proficient	Performance is satisfactory. Desired results are being produced in the manner expected.
S-Strong	Performance is characterized by exceptional proficiency.
O-Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1	Chief of CCS Registry--Supervises employees in setting up and maintaining Staff files and necessary card indices; receiving, distributing and dispatching correspondence to and from the Staff; and processing requests for file traces and other information.	RATING LETTER
		O
SPECIFIC DUTY NO. 2	CCS Records Management Officer--Responsible for overall management of CCS records management program. Monitors developments in DDO records management policies and procedures; maintains liaison with ISS and DDO Records Management Officers; seeks improvement in CCS records organization and discipline.	RATING LETTER
		O
SPECIFIC DUTY NO. 3	Works with personnel responsible for developing and launching the CCS computerized records system (CENCO) to ensure proper integration of Registry Information.	RATING LETTER
		S
SPECIFIC DUTY NO. 4		RATING LETTER
SPECIFIC DUTY NO. 5		RATING LETTER
SPECIFIC DUTY NO. 6		RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER

O

CONFIDENTIAL
CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

[] continued to perform in outstanding fashion as Chief of the CCS Registry during an extremely busy period. The figures cited in the last Fitness Report as to the workload of the CCS Registry continued to be representative of the volume and variety of [] responsibilities. He supervised the work of six subordinates with a successful combination of patience and firm professionalism. He continued to be the source of sound, constructive suggestions for coping with the paper "explosion" occasioned by the investigations of CIA and the Freedom of Information and Privacy Acts. [] is a highly valuable, reliable, unobtrusively effective records manager. In moving on to new responsibilities in an area division he leaves behind a solid record of achievement and the admiration of those with whom he has served in CCS.

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

24

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

16 August 1977

OFFICIAL TITLE OF SUPERVISOR

DC/CCS

SIGNATURE

2. BY EMPLOYEE

I HAVE ☒ OR HAVE NOT ☐ ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.

DATE

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

[] evaluation of [] performance during the reporting period agrees completely with my observations and conclusions. [] is a first-class professional records officer and supervisor who has clearly earned an overall rating of OUTSTANDING.

DATE

17 August 1977

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief, Central Cover Staff

TITLE

4. BY EMPLOYEE

I CERTIFY I HAVE SEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT. I HAVE ☒ HAVE NOT ☐ ATTACHED A STATEMENT CONCERNING THE REVIEWING OFFICIAL'S EVALUATION OF MY PERFORMANCE.

DATE

1977
18 Aug

SIGNATURE OF EMPLOYEE

CLASSIFICATION

CONFIDENTIAL

CONFIDENTIAL
CLASSIFICATION

FITNESS REPORT

SECTION A

GENERAL INFORMATION

1. EMPLOYEE NUMBER		2. NAME (Last, First, Middle)		3. DATE OF BIRTH	4. SEX	5. GRADE	6. DO
					M	GS-12	DAC
7. OFFICIAL POSITION TITLE				8. OFF/DIV/HR OF ASSIGNMENT		9. CURRENT STATION	
RECORDS ADMIN OF CH				DDO/CCS/REG		HQS	
10. CODE (CA, I)				11. TYPE OF REPORT		12. TYPE OF REPORT	
11. TYPE OF APPOINTMENT				12. TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL	
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> OTHER	13. REPORTING PERIOD (FROM-TO)		14. DATE REPORT DUE IN O.P.		
				1 July 1975-30 June 1976		30 July 1976	

SECTION B

QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

NO

SECTION C

PERFORMANCE EVALUATION

U--Unsatisfactory	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.
M--Marginal	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
F--Fair	Performance is satisfactory. Desired results are being produced in the manner expected.
S--Strong	Performance is characterized by exceptional proficiency.
O--Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1	Chief of Registry Section--supervises 6 employees in maintenance of Staff files and required card indices; receiving and distributing Staff correspondence; and processing requests for file checks and other information	RATING LETTER	S
SPECIFIC DUTY NO. 2	Records Management Officer--responsible for the overall CCS records management program	RATING LETTER	O
SPECIFIC DUTY NO. 3		RATING LETTER	
SPECIFIC DUTY NO. 4		RATING LETTER	
SPECIFIC DUTY NO. 5		RATING LETTER	
SPECIFIC DUTY NO. 6		RATING LETTER	

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER

O

CONFIDENTIAL
CLASSIFICATION

SECTION D		NARRATIVE COMMENTS	
<p><small>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.</small></p> <p>_____ is a quiet, highly effective manager of a major repository of records within the DDO. The workload of his Section is staggering: over 8,000 documents filed each month, over 500 index cards prepared each month; close to 300 Freedom of Information or Privacy Act requests processed each month, etc. _____ organizes his Section well; he handles a group of six women with skill and understanding and he heads, as a result, a harmoniously working team.</p> <p>_____ approaches problems with a positive attitude and brings his considerable experience and imagination to bear with appropriate initiative and follow-through. His response to the exceptionally heavy workload of the Staff over the past year of Congressional investigations and cover exposes was vital to the Staff's and the DDO's requirements for current and historical records. He volunteers ideas designed to improve the Staff's records; he works weekends and after hours to keep ahead of a growing avalanche of paper and requests for information. He is, in sum, a highly competent, knowledgeable, yet flexible records manager upon whom the Staff relies heavily.</p>			
SECTION E CERTIFICATION AND COMMENTS			
1. BY SUPERVISOR			
<p><small>MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION</small></p> <p style="text-align: center;">12</p>	<p><small>IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION</small></p>		
<p><small>DATE</small></p> <p>27 July 1976</p>	<p><small>OFFICIAL TITLE OF SUPERVISOR</small></p> <p>DC/CCS</p>	<p><small>TYPE AND OR PRINTED NAME AND SIGNATURE</small></p>	
2. BY EMPLOYEE			
<p><small>I HAVE <input type="checkbox"/> OR HAVE NOT <input type="checkbox"/> ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.</small></p>	<p><small>DATE</small></p> <p>27 July 76</p>	<p><small>SIGNATURE OF EMPLOYEE</small></p>	
3. BY REVIEWING OFFICIAL			
<p><small>COMMENTS OF REVIEWING OFFICIAL</small></p> <p>I have no difficulty in agreeing with the letter ratings and the narrative evaluation in the above report. _____ established the high level of his professional competence very soon after his assignment in CCS and has maintained this standard without interruption. I again must emphasize his abilities as supervisor in one of the toughest supervisory assignments known to me. With a Registry Chief like _____, it is easy to come to the conclusion that running a registry of the complexity and volume as that of CCS is a cinch - at least he makes it appear that way.</p>			
<p><small>DATE</small></p> <p>29 July 1976</p>	<p><small>OFFICIAL TITLE OF REVIEWING OFFICIAL</small></p> <p>Chief, CCS</p>	<p><small>TYPE AND OR PRINTED NAME AND SIGNATURE</small></p>	
4. BY EMPLOYEE			
<p><small>I CERTIFY I HAVE SEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT. I HAVE <input checked="" type="checkbox"/> HAVE NOT <input type="checkbox"/> ATTACHED A STATEMENT CONCERNING THE REVIEWING OFFICIAL'S EVALUATION OF MY PERFORMANCE.</small></p>	<p><small>DATE</small></p> <p>29 July</p>	<p><small>SIGNATURE</small></p>	

CLASSIFICATION
CONFIDENTIAL

SECRET
CLASSIFICATION

FITNESS REPORT

SECTION A

GENERAL INFORMATION

1. EMPLOYEE NUMBER		2. NAME (last, first, middle)		3. DATE OF BIRTH		4. SEX	5. GRADE	6. DD
						M	GS-12	DAC
7. OFFICIAL POSITION TITLE				8. OFF/DIV/BR OF ASSIGNMENT		9. CURRENT STATION		
Records Admin OF-CH				DDO/CCS/REG		HQS		
11. TYPE OF APPOINTMENT				12. TYPE OF REPORT				
<input checked="" type="checkbox"/>	CAREER	<input type="checkbox"/>	RESERVE	<input type="checkbox"/>	CONTRACT	<input type="checkbox"/>	OTHER (Spec.)	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	TEMPORARY	<input checked="" type="checkbox"/>	ANNUAL	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	REASSIGNMENT	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	SPECIAL	
13. REPORTING PERIOD (from-to)				14. DATE REPORT DUE IN O.P.				
1 January 1975 - 30 June 1975				31 July 1975				

SECTION B

QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C

PERFORMANCE EVALUATION

U—Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.

M—Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

P—Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

S—Strong Performance is characterized by exceptional proficiency.

O—Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1	RATING LETTER
Chief of Registry Section - supervises 7 employees	S
SPECIFIC DUTY NO. 2	RATING LETTER
Records Management Officer - responsible for the overall CCS records management program, ensuring that it is in conformity with DDO and Agency records management policy and procedures.	O
SPECIFIC DUTY NO. 3	RATING LETTER
SPECIFIC DUTY NO. 4	RATING LETTER
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER
S

SECRET

CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

JUL 8 11 29 AM '75

During the 6 months under review [redacted] has continued to fulfill his responsibilities in the same excellent manner which has been documented in his last two fitness reports and which led to his promotion to GS-12. [redacted] surefootedness as a records officer and manager of people, together with ability to take necessary initiatives where actions are required and his maturity and sound judgement, make him an ideal chief of this very active and complex registry and records management office. I dread to think that eventual rotation will deprive me of the services of this extraordinarily competent and effective officer.

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

1 year, 9 months

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

7 July 1975

OFFICIAL TITLE OF SUPERVISOR

Chief, CCS

TY

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE

DATE

7 July 1975

SI

HAVE ATTACHED

HAVE NOT ATTACHED

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

There is no one in the chain of command who could act as reviewing officer.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

4. BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT

DATE

7 July 1975

SIGNATURE OF EMPLOYEE

CLASSIFICATION

SECRET

CLASSIFICATION:

FITNESS REPORT			
SECTION A GENERAL INFORMATION			
1. NAME (Last, First, Middle Initial)		4. SEX	5. GRADE & SD
		M	GS-12 D
7. OFFICIAL POSITION TITLE		8. OFF/DIV/BR OF ASSIGNMENTS, CURRENT STATION	
RECORDS ADMIN OF-CH		DDO/CCS/REGISTRY HEADQUARTERS	
9. CODE (4 Digits)		10. CODE (4 Digits)	
X HQS		DP	
11. TYPE OF APPOINTMENT		12. TYPE OF REPORT	
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> CONTRACT <input type="checkbox"/> OTHER (Spec.) <input type="checkbox"/> TEMPORARY <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT <input checked="" type="checkbox"/> SPECIAL			
13. REPORTING PERIOD (from-to)		14. DATE REPORT DUE IN O.P.	
1 June 1974-31 December 1974		31 January 1974 (Retirement of Supervisor)	
SECTION B QUALIFICATIONS UPDATE			
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.			
SECTION C PERFORMANCE EVALUATION			
U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D. M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described. P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected. S-Strong Performance is characterized by exceptional proficiency. O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
SPECIFIC DUTIES			
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).			
SPECIFIC DUTY NO. 1			RATING LETTER
Chief of Registry Section - supervises seven employees			S
SPECIFIC DUTY NO. 2			RATING LETTER
Records Management Officer - responsible for the overall CCS records management program, ensuring that it is in conformity with DDO and Agency records management policy and procedures.			O
SPECIFIC DUTY NO. 3			RATING LETTER
CCS Security Officer - Briefs all new and departing CCS employees on Agency and CCS security procedures. Also responsible for duty rosters and related security instructions, and maintains liaison with the Office of Security - through 6 October 1974.			S
SPECIFIC DUTY NO. 4			RATING LETTER
SPECIFIC DUTY NO. 5			RATING LETTER
SPECIFIC DUTY NO. 6			RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION			
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.			RATING LETTER
			S

FORM 45 9-73

CLASSIFICATION
SECRET

E2, IMPDET CL BY

NOV 1974

SECRET
CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost considerations in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

Since his last Fitness Report, in June 1974, [] has continued his extremely fine performance as a conscientious, hardworking and thoughtful records manager and registry supervisor. The CCS registry workload remains at about the same level as previously reported, and [] regularly works an hour or so of uninterrupted overtime every working day personally reorganizing procedures, cleaning out, consolidating, and retiring files. His enthusiastic determination in reducing the numbers of out-of-date and no longer useful files is most exemplary. Knowing the numbers of primary and supplemental files involved in this exercise, and as a retiring supervisor, I can only wish him "good luck"!

[] also continues eager to learn and use new methods and techniques. During this reporting period, in July 1974, he took the Agency course "Introduction to Micrographics Seminar #2."

Finally it gives me pleasure to note here that, effective 24 November 1974, Mr. [] will be given a well deserved promotion from GS 11/6 to GS 12/3.

SECTION E

CERTIFICATION AND COMMENTS

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION		1. BY SUPERVISOR	
15 months		IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE		OFFICIAL TITLE OF SUPERVISOR	
20 November 1974		Deputy Chief, CCS	
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE		2. BY EMPLOYEE	
DATE		SIGNATURE	
20 Nov 74			
HAVE ATTACHED <input checked="" type="checkbox"/> HAVE NOT ATTACHED <input type="checkbox"/>		3. BY REVIEWING OFFICIAL	
COMMENTS OF REVIEWING OFFICIAL			
Both [] letter ratings and narrative comments accurately reflect the quality of [] performance during the reporting period. He is a thoroughgoing professional records officer who uses his extensive experience and his good judgement to take initiatives toward improving the Registry service and the management of records. Hand in hand with his high substantive competence goes his excellent ability as a supervisor. I can say nothing more laudable in this regard than that I have not had to deal with Registry personnel problems during the last year. He knows the job that needs to be done and so do his people. With this kind of leadership, the work gets accomplished with a high state of			
DATE		OFFICIAL TITLE OF REVIEWING OFFICIAL	
25 November 1974		Chief, Cover and Commercial Staff	
I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT		4. BY EMPLOYEE	
		DATE	
		25 Nov 74	

CLASSIFICATION
SECRET

S E C R E T
CLASSIFICATION

FITNESS REPORT										
SECTION A GENERAL INFORMATION										
1. EMPLOYEE NUMBER		2. NAME (Last, first, middle)			3. DATE OF BIRTH		4. SEX		5. GRADE	
							N		GS-11	
									D	
7. OFFICIAL POSITION TITLE				8. OFF/DIV/BR OF ASSIGNMENT		9. CURRENT STATION		10. CODE (if any)		
RECORDS ADMIN OF - CH				DDO/CCS/REGISTRY		HEADQUARTERS		X		DP
11. TYPE OF APPOINTMENT					12. TYPE OF REPORT					
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> CONTRACT <input type="checkbox"/> OTHER (Spec.) <input type="checkbox"/> TEMPORARY					<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT <input type="checkbox"/> SPECIAL					
13. REPORTING PERIOD (from-to)					14. DATE REPORT DUE IN O.P.					
1 June 1973 - 31 May 1974					30 June 1974					
SECTION B QUALIFICATIONS UPDATE										
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.									NO	
SECTION C PERFORMANCE EVALUATION										
<p>U—Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.</p> <p>M—Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.</p> <p>P—Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S—Strong Performance is characterized by exceptional proficiency.</p> <p>O—Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>										
SPECIFIC DUTIES										
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).										
SPECIFIC DUTY NO. 1								RATING LETTER		
Chief of Registry Section - supervises seven employees.								S		
SPECIFIC DUTY NO. 2								RATING LETTER		
Records Management Officer - responsible for the overall CCS records management program, ensuring that it is in conformity with DDO and Agency records management policy and procedures.								O		
SPECIFIC DUTY NO. 3								RATING LETTER		
CCS Security Officer - Briefs all new and departing CCS employees on Agency and CCS security procedures. Also responsible for duty rosters and related security instructions, and maintains liaison with the Office of Security.								S		
SPECIFIC DUTY NO. 4								RATING LETTER		
SPECIFIC DUTY NO. 5								RATING LETTER		
SPECIFIC DUTY NO. 6								RATING LETTER		
OVERALL PERFORMANCE IN CURRENT POSITION										
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.									RATING LETTER	
									S	

[Signature]

SECRET
CLASSIFICATION

SECTION D		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment, and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.</p> <p>After a short overlap with his predecessor, [redacted] assumed his responsibilities as Chief of Registry, CCS, on 3 October 1973 - roughly nine months ago. In this position he is responsible, overall, for CCS registry and records management activities, including the supervision of seven other individuals. As could be expected from even a casual reading of his past fitness reports, [redacted] quickly took hold, and has been performing his new responsibilities in an exemplary manner. Despite the volume and variety of files with which he was required to become familiar, early on he systematically began cleaning out, consolidating, and retiring files as appropriate, reorganizing and updating the indexing system for individual and project files, and redistributing employee workloads. He also reorganized the placement of file machinery, desks, and service counter to achieve greater employee comfort and efficiency in the utilization of personnel. Although his task as Staff Security Officer is a secondary function, he also reorganized, simplified and re-wrote the security check and duty officer roster procedures.</p> <p>Indicative of the work which he supervises are selected Registry statistics for May 1974: 7015 documents filed, 8200 files pulled (and re-filed) for Staff officers' use, 6642 cables processed and distributed, 9900 facility and name searches, 2353 documents logged, 833 index cards made and filed, and 200 new files opened. During his nine months with CCS, [redacted] not only has had to learn the CCS "system" himself,</p>			
SECTION E		CERTIFICATION AND COMMENTS	
1. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
10 mos			
DATE	OFFICIAL TITLE OF SUPERVISOR	TY	
25 June 1974	DC/CCS		
2. BY EMPLOYEE			
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	G	
<input type="checkbox"/> HAVE ATTACHED <input checked="" type="checkbox"/> HAVE NOT ATTACHED	25 June 74		
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>In the relatively short period of his assignment to CCS, [redacted] has completely lived up to his advance billing as reflected in past fitness reports. [redacted] has provided the specifics of [redacted] accomplishments and has left me only to say that [redacted] is a first class professional Records Officer and supervisor who fully deserves an overall rating of Strong.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TY	
1 Aug	C/CCS		
4. BY EMPLOYEE			
I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT.		DATE	
		1 July 74	

CLASSIFICATION
SECRET

S E C R E T

Fitness Report

SECTION D NARRATIVE COMMENTS (continued)

but has been required, due to a turnover in personnel, to train three new Records Clerks.

Courses taken since the start of his tour with CCS include Operational Records I and III, ADP I, Forms Management Seminar, and Forms Analysis and Design Workshop.

has proved to be a conscientious, hard-working and thoughtful records manager and supervisor, and CCS is glad to have him aboard. I am sure that the next records inventory will provide statistical evidence of his abilities as a "housecleaner."

S E C R E T

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				010032	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
				M	GS-11 D
6. OFFICIAL POSITION TITLE			7. OFF. DIV/BR OF ASSIGNMENT		8. CURRENT STATION
Records Admin Officer			DDO/EUR		Rome
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 June 72 - 31 May 73		
SECTION B PERFORMANCE EVALUATION					
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Station Records Management and Control Officer - responsible for the mediation, preparation, implementation and control of the Records Management Program.					RATING LETTER O
SPECIFIC DUTY NO. 2 Chief of Registry Section - in this capacity he supervises one employee in the processing and pouching of all dispatch and other correspondence; serves as the cable analyst, processing and distributing all cable traffic; and serves as Top Secret Control Officer.					RATING LETTER S
SPECIFIC DUTY NO. 3					RATING LETTER
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER O

MAY 1974

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be summarized on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

This officer has continued to perform with a high degree of effectiveness and accomplishment. He has concentrated on improving our records holding standards and on purging irrelevant and outdated files. In May 1972 he began a monthly series of progress reports for the Chief of Station outlining the month's accomplishments. Copies of these reports through January 1973 were sent to Hqs in OIRT-18014 and 18015, dated 9 Feb 73. These reports clearly show this officer's focus on records management activities, his ingenuity and aggressiveness in launching programs of review of files and his tireless efforts in reducing Station holdings to a practical and useable minimum. His records inventory as of September 1972, reporting a total reduction in excess of 85 feet, speaks for itself. His next report also promises to show dramatic reductions.

This officer shows a sense of professional responsibility and determination in the oft neglected function of records management, deeper and more intense than any other witnessed by the rating officer in his career. He performs his other duties as Chief, Registry with an equally high degree of effectiveness. Subject officer may have been inadvertently hiding his talents under the proverbial bushel basket by having remained in the field for so long. It is the rater's hope that Hqs now has focussed on him and has discovered his potential for greater responsibilities. The records in this Station are tremendously improved for his having had a tour [redacted]. We are certainly glad he came.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, D, AND C OF THIS REPORT		
DATE 30 April 1973	SIGNATURE /s/ [redacted]	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 23 May 1973	OFFICIAL TITLE OF SUPERVISOR Admin Officer	TYPED OR PRINTED NAME AND SIGNATURE /s/ [redacted]
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
This officer has been remarkably effective during his tour [redacted]. While we are very sorry to lose him, there is no question that his formidable talents should be used on a much broader range of records management and related problems than could be done in this Station. His next assignment in Headquarters appears to give him that additional scope. We are glad that he served [redacted] and that during this tour here he received a well-deserved promotion. [redacted] Station's records have improved considerably as a result of this officer's tour here. I am in full agreement with the above comments and ratings.		
DATE 23 May 1973	OFFICIAL TITLE OF REVIEWING OFFICIAL Ops Officer	TYPED OR PRINTED NAME AND SIGNATURE /s/ [redacted]

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				010032	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE
				M	GS-10
5. OFFICIAL POSITION TITLE			6. OFF/DIV/BR OF ASSIGNMENT		
Records Admin Officer			DDP/EUR		
7. CHECK (X) TYPE OF APPOINTMENT			8. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
9. DATE REPORT DUE IN O.P.			10. REPORTING PERIOD (From - to)		
31 July 1972			1 October 1971 - 31 May 1972		
SECTION B PERFORMANCE EVALUATION					
U-Unsatisfactory		Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.			
M-Marginal		Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.			
P-Proficient		Performance is satisfactory. Desired results are being produced in the manner expected.			
S-Strong		Performance is characterized by exceptional proficiency.			
O-Outstanding		Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Chief of Registry Section - In this capacity he supervises one employee in the processing and pouching of all dispatch correspondence and in the performance of other registry duties.					RATING LETTER O
SPECIFIC DUTY NO. 2 Station Records Officer - Responsible for the Station's Record Management Program.					RATING LETTER O
SPECIFIC DUTY NO. 3 Cable Analyst - Processes and distributes all incoming and outgoing cable traffic.					RATING LETTER S
SPECIFIC DUTY NO. 4 Top Secret Control Officer.					RATING LETTER S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER O

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p><small>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Worth of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</u></small></p> <p>This officer's performance over the past year has been outstanding. He is a skilled professional records manager, an indefatigable worker and a highly imaginative and efficient supervisor. Since his last Fitness Report he has directed a TDY team of records officers in a concentrated program of records reduction. He devised the program and supervised its execution with most effective results. This officer is a driver and a doer. He constantly strives to improve the Station's records management posture and follows up with procedures designed to maintain the gains achieved by his efforts. It is highly gratifying and stimulating to work with him. He sees the broad dimensions of the task at hand and focuses constantly on improving the system. This quality convinces the rater that he is capable of greater responsibilities in a position of broader scope. I recommend that Headquarters begin to plan for the utilization of this officer on the completion of his tour of duty [redacted]. He should be placed in a Headquarters position in which his skills and broad experience can be fully used and in which he can achieve the professional growth of which he is both capable and deserving.</p>			
SECTION D			
CERTIFICATION AND COMMENTS			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE		
17 July 1972	/s/ [redacted]		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
17 July 1972	Admin Officer	/s/ [redacted]	
3. BY REVIEWING OFFICIAL			
<p>COMMENTS OF REVIEWING OFFICIAL</p> <p>I concur in the comments of the rating officer and believe the overall outstanding rating is well deserved. Subject is a first-rate Records Management officer - deeply interested in his work, conscientious in the extreme and always looking for an innovative approach that will upgrade the functioning of Registry and better serve Station needs. Without losing sight of the unending pressure to reduce and periodically reorder the Station's holdings, this officer avoids assuming attitudes that are cast in cement. He works with the Branches and individual officers in solving problems rationally. He is unfailingly pleasant and courteous and is well-liked by all. The Station is fortunate to have</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
25 July 1972	DCOS	/s/ [redacted]	

SECRET

ON DUTY

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX M		4. GRADE GS-10	
5. OFFICIAL POSITION TITLE Records Admin Off		7. OFF/DIV/BR OF ASSIGNMENT DDP/EUR		8. STATION SJT #1		9. SD D	
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY				<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE			
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to) 4 July 1971-30 September 1971			
SECTION B PERFORMANCE EVALUATION							
U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.							
M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.							
P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.							
S-Strong Performance is characterized by exceptional proficiency.							
O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Chief of Registry Section - In this capacity he supervises one employee in the processing and pouching of all dispatch correspondence and other registry duties.						RATING LETTER S	
SPECIFIC DUTY NO. 2 Station Records Officer - Responsible for the Station's record program and to give guidance and/or assist the Station officers when called upon to do so.						RATING LETTER S	
SPECIFIC DUTY NO. 3 Cable Analyst - Process and distribute all incoming and outgoing cable traffic, this includes maintenance of the chrono files.						RATING LETTER S	
SPECIFIC DUTY NO. 4 Top Secret Control Officer.						RATING LETTER P	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S	

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p>			
<p>I have worked with this officer just 2½ months, but this has been long enough to satisfy me that he is above average in registry work. He is a very knowledgeable registry technician, but most important, he is aggressive and imaginative in devising new procedures, or revising old ones to improve the quality of registry service to this Station. He is affable in dealing with his peers and confident and persuasive in dealing with the senior management of this Station. Shortly after his arrival he took over the analysing and distribution of the cables, and prepared a Station procedure for this purpose. Immediately following that, he devised a new procedure for handling correspondence and installed it. He had reviewed the multitudinous files at this Station and has plans to trim them back to more reasonable and appropriate dimensions. In every respect, this officer has taken charge of the function he is here to perform, and has devoted a great deal of time, thought and effort to improve it. We are indeed satisfied with his performance.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE		
4 October 1971	/s/ []		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
2½ months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
4 October 1971	Chief, Support	/s/ []	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Since I have just arrived at the Station I have not had an opportunity to observe this officer's performance. However, I respect the rating officer's judgment, which in this case coincides with other favorable comments I have heard about the Subject. I therefore defer to the rating officer's evaluation.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
4 October 1971	Deputy Chief of Station	/s/ []	

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX M	4. GRADE GS-10	5. SD D
6. OFFICIAL POSITION/TITLE Records Adm. Officer				7. OFF/DIV/BR OF ASSIGNMENT DDP/EUR		8. CURRENT STATION <div style="border: 1px solid black; width: 100px; height: 20px;"></div>	
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY				<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE			
<input type="checkbox"/> SPECIAL (Specify):				<input checked="" type="checkbox"/> SPECIAL (Specify): Promotion			
11. DATE REPORT DUE IN U.P.				12. REPORTING PERIOD (From - to) 1 January 1971 - 30 May 1971			
SECTION B PERFORMANCE EVALUATION							
U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described. P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected. S-Strong Performance is characterized by exceptional proficiency. O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Reviewed, retired and rationalized <div style="border: 1px solid black; width: 50px; height: 15px;"></div> Branch Files and explained same system to Branch personnel							RATING LETTER O
SPECIFIC DUTY NO. 2							RATING LETTER
SPECIFIC DUTY NO. 3							RATING LETTER
SPECIFIC DUTY NO. 4							RATING LETTER
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER O

3 AUG 1971

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of utilization of personnel for supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

[redacted] first made a survey of the Augcan stable that the [redacted] files had become over many years of shifts in personnel and changes of direction. He then reviewed, downgraded, and retired approximately 350 Top Secret documents with appropriate Project and Subject files and copies destroyed. At the completion of this there was not one Top Secret document on the Branch. He devised, gained approval from FI/D, and carried out a new procedure for the downgrading of [redacted] material from Top Secret to Secret so that it could be retired. He retired approximately 60 Project, 25 Subject, and fifty 201 files. He surveyed the [redacted] files and discovered that there were a total of 93 of which 19 were already closed. He closed 47 of the remainder and left 25 open and arranged for RID/ARD to retire all the material in the open files prior to 1 January 1971. He closed and retired Plan files dating back to the early 1950's. All in all, out of 76 feet of safe space filled with CS material, he retired 36 feet of files leaving a catalogue of where everything is or has been sent. A remarkable record (and done with a minimum of fuss and Branch dislocation)!

What he did in such a short time speaks eloquently of how he went about his duties for which see the accompanying memorandum of recommendation for promotion. Reporting officer has known him over fourteen years and has the unvarying impression of him as a quietly competent, diligent, reliable, self-reliant individual.

/continued/

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, D, AND C OF THIS REPORT.

DATE

SIGNATURE OF EMPLOYEE

Subject now in Rome Station

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

4 months

See above

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPE

27 July 1971

ADC/EUR [redacted]

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL I concur in the above evaluation. Subject turned in a most impressive performance during his brief time [redacted] Largely as a result of his enthusiasm and initiative, the Branch was able to achieve what had never been accomplished before: a complete overhaul, cleaning, purging, and restructuring of its filing system. To his credit, Subject has a keen appreciation for operational requirements and all of this work was done without sacrificing the future utilization of information acquired in the past; on the contrary, the efficient use of this material has been so enhanced that it will surely be reflected in our future operations. [redacted] has a unique contribution to make [redacted] or any other place he is assigned. The Station is fortunate to have him...his presence is sorely needed to do the same thing [redacted] that he has just accomplished

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

27 July 1971

Chief [redacted]

SECRET

SECRET

-2-

You give him a job and need not worry about whether or how it will be done.

The job offered no opportunity to observe his supervisory capabilities. He is cost conscious and security conscious.

Fitness Report

(continued)

SECTION D.3. (continued).

in Headquarters. The importance of his contribution and his personal initiative and efforts should be rewarded by a promotion.

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER <div style="border: 1px solid black; width: 50px; height: 15px; margin: 0 auto;"></div>	
SECTION A GENERAL					
1. NAME <div style="border: 1px solid black; width: 100%; height: 15px;"></div>		2. SEX M	4. GRADE GS-10	3. DO D	
5. OFFICIAL POSITION TITLE Recs Adm Off		7. OFF/DIV/BR OF ASSIGNMENT DDP/EUR/		8. CURRENT STATION <div style="border: 1px solid black; width: 50px; height: 15px;"></div>	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):		<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 30 November 1970		12. REPORTING PERIOD (From - to) 30 June 1970 - 18 November 1970			
SECTION B PERFORMANCE EVALUATION					
U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described. P-Profluent Performance is satisfactory. Desired results are being produced in the manner expected. S-Strong Performance is characterized by exceptional proficiency. O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Responsible for organization and direct management of the Station Registry					RATING LETTER S
SPECIFIC DUTY NO. 2 First-line supervisor for two full-time registry assistants.					RATING LETTER S
SPECIFIC DUTY NO. 3 Organizes and implements review and purge of Registry and other Station files.					RATING LETTER O
SPECIFIC DUTY NO. 4 Prepares Station notices and outgoing correspondence on Registry matters.					RATING LETTER S
SPECIFIC DUTY NO. 5 Maintains and controls case file index and 201 file index.					RATING LETTER S
SPECIFIC DUTY NO. 6 Top Secret Control Officer					RATING LETTER S
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p><small>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable.</u> If extra space is needed to complete Section C, attach a separate sheet of paper.</small></p>			
<p>In the four months he has been under my supervision, Subject has demonstrated that he merits in full measure the high opinion of him held by his previous supervisor. Conscientious, careful, fully knowledgeable of Registry procedures he has gone about his day-to-day tasks in an exceptionally proficient way without the need for constant supervision. He is prompt in his response to requests and has an excellent sense of "got the job done". He is an intelligent and concerned supervisor who has been meticulous in keeping his supervisors briefed on personnel and other problems as they have arisen in the Station Registry. He appears fully capable of assuming larger responsibilities in the records field. The rating officer regrets that Subject's family situation precludes his staying for another tour.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIG		
17 Nov 1970			
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
4 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
17 November 1970	DCOS	/s/ [redacted]	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Although the rating officer is newly arrived [redacted], he has had numerous opportunities in the past to observe Subject's work and the results he has achieved in reducing [redacted] files to manageable proportions. As a result the ratings awarded in this report are endorsed without hesitation.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
23 November 1970	COS	/s/ [redacted]	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX M	4. GRADE GS-10
5. OFFICIAL POSITION TITLE Records Admin Off			6. OFF/DIV/BR OF ASSIGNMENT DDP/EUR	7. CURRENT STATION	
8. CHECK (X) TYPE OF APPOINTMENT			9. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
10. SPECIAL (Specify)			11. SPECIAL (Specify)		
12. DATE REPORT DUE IN O.P.			13. REPORTING PERIOD (From - to) 1 October 1969 - 30 June 1970		
SECTION B PERFORMANCE EVALUATION					
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Responsible for organization and direct management of station registry.					RATING LETTER S
SPECIFIC DUTY NO. 2 First-line supervisor for two full-time and one part-time registry assistants.					RATING LETTER S
SPECIFIC DUTY NO. 3 Organizes and implements review and purge of registry and other station files.					RATING LETTER O
SPECIFIC DUTY NO. 4 Prepares station notices and outgoing correspondence on registry matters.					RATING LETTER S
SPECIFIC DUTY NO. 5 Maintains and controls case file index and 201 file index.					RATING LETTER S
SPECIFIC DUTY NO. 6 Top Secret Control Officer.					RATING LETTER S
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position: his performance at specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

SECTION C		NARRATIVE COMMENTS	
<p><small>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</small></p>			
<p>With about nineteen months experience managing the station registry already under his belt, his usefulness here increases. He continues to demonstrate the same quietly effective leadership and talent for sound organization in his own shop as were noted on the last fitness report.</p> <p>While maintaining a high standard in the more routine day-to-day services and processes a registry is normally expected to supply, he has also been the catalyst for a thorough, carefully phased and continuing review and, where appropriate, purge of registry and other file holdings. Administering this ambitious reduction program requires sound judgment and experience in handling the detail in our existing records. Subject has these qualities and has achieved impressive results. To complete this task, he has asked to extend his tour here for one year until November 1971 and Headquarters has approved this.</p> <p>He is invariably completely responsive to guidance from the DCOS, his immediate supervisor, and conscientiously seeks to achieve the work goals which are identified during our occasional accomplishment and performance consultations. The spirit of cooperation with which he deals with other station personnel is equally commendable.</p> <p>No criticism can be made of his security department.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
18 June 1970	/s/ 		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
18 June 1970	DCOS	/s/ 	
3. BY REVIEWING OFFICIAL			
<p>COMMENTS OF REVIEWING OFFICIAL</p> <p>Concur entirely with this favorable assessment. Subject has been a dedicated and conscientious supervisor of his office. His achievements have been quite measurable and specific, as described in the above report. On the basis of his performance here, Subject should have excellent career prospects for further growth in his chosen field.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
22 June 1970	COS	/s/ 	

SECRET

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>	
SECTION A GENERAL						
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
				M	GS-10	D
6. OFFICIAL POSITION TITLE Records Admin Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/EUR		8. CURRENT STATION	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 31 October 1969			12. REPORTING PERIOD (From to) 18 November 1968-30 September 1969			
SECTION B PERFORMANCE EVALUATION						
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>						
SPECIFIC DUTIES						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).						
SPECIFIC DUTY NO. 1 Responsible for organization and direct management of Station Registry.						RATING LETTER S
SPECIFIC DUTY NO. 2 First-line supervisor for at first three, later two, full-time Registry personnel and one part-time Registry assistant.						RATING LETTER S
SPECIFIC DUTY NO. 3 Provides informal training and guidance to some Station officers and secretaries on records procedures.						RATING LETTER S
SPECIFIC DUTY NO. 4 Prepares Station Notices and outgoing correspondence on Registry matters.						RATING LETTER P
SPECIFIC DUTY NO. 5 Maintains and controls case file index and 201 file index.						RATING LETTER S
SPECIFIC DUTY NO. 6 Top Secret control officer.						RATING LETTER S
OVERALL PERFORMANCE IN CURRENT POSITION						
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Analyze or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable. He arrived ten months ago at this post with considerable experience in Registry work at Headquarters and at other field stations and with a thorough understanding of how a Station Registry should be organized and run. He immediately put this understanding to good use. While maintaining the overall efficiency of Registry programs already in effect when he took over, he enthusiastically began a carefully-planned and continuing effort to further reduce less than essential Registry paper holdings with results which are already impressive. His suggestions on new procedures designed to conserve space and manpower are usually imaginative and practical.</p> <p>He himself is a remarkably well-organized, conscientious and cooperative person.</p> <p>He has had to undertake his improvements while accommodating to the loss of one Registry slot which fell victim to a [redacted] reductions program. Primarily due to his managerial talents, the Registry has been made to carry on almost as well with three regulars as with the previous four. Although his people are increasingly hard-worked, their morale is high. He himself appears to be a glutton for work but his Registry is obviously a happy shop.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
9 October 1969	/s/ [redacted]		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 October 1969		/s/ [redacted]	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Concur with this very favorable assessment. Subject has a real talent for work in his chosen field and his professional accomplishments here have been impressive. Subject's career should be watched with care and there should be room for considerable advancement in the Records Management end of our business.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
5 November 1969		/s/ [redacted]	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE
				M	GS-10 D
5. OFFICIAL POSITION TITLE Records Admin Of			7. OFF/DIV/BR OF ASSIGNMENT DDP/FE/VNO		8. CURRENT STATION Vietnam
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			5 March 1968 - 5 October 1968		
SECTION B PERFORMANCE EVALUATION					
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Chief Station Registry					RATING LETTER O
SPECIFIC DUTY NO. 2 Management and training of personnel under his supervision					RATING LETTER S
SPECIFIC DUTY NO. 3 Scheduling of routine and exceptional work assigned to his unit.					RATING LETTER O
SPECIFIC DUTY NO. 4 Preparation of routine and other reports on the activities of his Section.					RATING LETTER S
SPECIFIC DUTY NO. 5 Overall Security of Registry operations					RATING LETTER S
SPECIFIC DUTY NO. 6 8 OCT 1968 PK					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable.</u> If extra space is needed to complete Section C, attach a separate sheet of paper.</p>			
<p>This is Subject's final Fitness Report as Chief, Registry at Vietnam Station. He has worked long and hard but can look with pride at the many accomplishments that he has effected during his tenure. He will depart leaving a sound and well-functioning organization. His planning has been effective and his cross-training and development of the personnel under his supervision have been fully productive.</p>			
<p>During this period, his unit has experienced heavy increases in workload and assumed new or additional functions with no reduction in the service provided to Station components.</p>			
<p>Subject has been responsible for many work saving innovations, procedural changes and a thorough updating and revamping of the highly important registry reference records.</p>			
<p>The personnel under his supervision display enthusiasm and dedication in their work. Their pleasant manner is a reflection of Subject's management ability.</p>			
<p>Subject performs his managerial and supervisory duties in a highly professional manner. He knows systems, writes lucid and concise procedures and reacts positively to situations. He is a "Doer".</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
21 Sept 1968	/s/ []		
2. BY SUPERVISOR			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
21 Sept 1968	Records Admin Officer	/s/ []	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur in the ratings and comments of the Rating Officer.</p> <p>Subject has been most amenable and responsive to positive direction.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
21 Sept 1968	Ctr Officer	/s/ []	

SECRET

S E C R E T

-2-

NARRATIVE COMMENTS, Section C. (Continued)

I have enjoyed serving with Subject, wish him success at his next post and look forward to serving with him again.

Subject is cost conscious.

S E C R E T

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (First) (Middle)		3. SEX		4. GRADE	5. SD
		M		GS-9	D
6. OFFICIAL POSITION TITLE		ASSIGNMENT		8. CURRENT STATION	
Records Admin Officer		DDP/FE/VHO		Vietnam	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			X SPECIAL (Specify): Promotion		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 Oct 67 - 31 March 68		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 Chief Station Registry					S
SPECIFIC DUTY NO. 2 Management and training of Personnel under his supervision					P
SPECIFIC DUTY NO. 3 Scheduling of routine and exceptional work assigned to his unit					O
SPECIFIC DUTY NO. 4 Preparation of routine and other reports on the activities of his Section					S
SPECIFIC DUTY NO. 5 Overall Security of Registry operations					P
SPECIFIC DUTY NO. 6					RATING LETTER
20 MAY 1968 OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S

SECRET

(When Filled In)

SECTION C NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Subject has done an excellent job in organizing the layout and arranging the work flow in the new Station Registry. As a result, his unit has been operating on a fully effective and productive basis, even during the recent emergency when certain workloads increased several hundred per cent. In operation and physical appearance the Station Registry may be considered a model registry.

He is very cooperative and works well with other offices in solving mutual problems or setting up new requirements.

Subject is industrious and dedicated and willingly works long hours to meet the daily demands of his position. He performed in an exemplary manner while working for an extended period under stress during the recent emergency.

Subject is a pleasant, dependable individual who is anxious to do the best job possible in a demanding and vital position at the Station.

He is properly cost conscious in the use of personnel, space and equipment.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
8 MONTHS	Subject has not reviewed this report inasmuch as it recommends him for promotion.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
5 March 1968	Records Admin Officer	/s/ []
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
5 March 1968	Ops Officer	/s/ []

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block; vertical-align: middle;"></div> ✓	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div>			2. DATE OF BIRTH <div style="border: 1px solid black; width: 80px; height: 20px; display: inline-block;"></div>		3. SEX M
4. GRADE GS-9			5. SD D		
6. OFFICIAL POSITION TITLE Records Admin Of			7. OFF/DIV/BR OF ASSIGNMENT DDP/FE/VNO		8. CURRENT STATION Vietnam
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From- to-) 10 May 1967 - 30 Sep, 1967		
SECTION B PERFORMANCE EVALUATION					
W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence. P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner. S - Strong Performance is characterized by exceptional proficiency. O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 Chief, Station Registry Section					P
SPECIFIC DUTY NO. 2 Management and training of personnel under his supervision					A
SPECIFIC DUTY NO. 3 Scheduling of routine and exceptional work assigned to his unit.					S
SPECIFIC DUTY NO. 4 Preparation of routine and other reports on the activities of his Section.					P
SPECIFIC DUTY NO. 5 Overall security of Registry operations.					A
SPECIFIC DUTY NO. 6 29 NOV 1967					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					P

SECRET
(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Monest of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</u></p> <p>Subject is responsible for the supervision and operation of one of the more diversified and complex field registry operations in the Organization. He is thoroughly knowledgeable and experienced in registry practices. Subject is a dedicated and hard working officer who will apply himself diligently to individual registry activities. Such diligent application occasionally causes him to overlook his overall supervisory role, the supervision and management of eleven personnel and the responsibility for providing a wide variety of services, locally and in-country. In the press of his activities, he does not always employ a high degree of tact in dealing with his subordinates. In this context it should be noted that he is performing proficiently in a position well above his present grade level.</p> <p>During the past several months, the Section has undergone several changes and assumed additional functions under his guidance.</p> <p>Subject is cost conscious in the use of supplies and equipment in his Section.</p> <p>Subject is attending evening courses leading toward his degree to further himself professionally.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
14 Aug 1967	/s/ []		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
14 Oct 1967	Records Admin Officer	/s/ []	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur in the ratings and comments of the supervisor. In fairness to the employee, it should be noted that the supervisor is a conscientious and conservative rater.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
14 Oct 1967	Ops Officer	/s/ []	

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX M	4. GRADE GS 9	5. SO D
6. OFFICIAL POSITION TITLE Records Admin Officer				7. OFF/DIV/BR OF ASSIGNMENT DCR/P2/TFO		8. CURRENT STATION VIETNAM	
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER		<input type="checkbox"/> RESERVE		<input type="checkbox"/> TEMPORARY		<input type="checkbox"/> INITIAL	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input type="checkbox"/> ANNUAL		<input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> SPECIAL (Specify):				<input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to) 14 Jan 67 - 9 May 67			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							RATING LETTER
SPECIFIC DUTY NO. 1 Chief, Registry with supervisory responsibility for 8 employees.							S
SPECIFIC DUTY NO. 2							RATING LETTER
SPECIFIC DUTY NO. 3							RATING LETTER
SPECIFIC DUTY NO. 4							RATING LETTER
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p><small>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</small></p> <p align="right" style="margin-right: 50px;">Jun 12 10 44 AM '67</p> <p style="margin-top: 20px;">Although Subject has been at the Station for only a few months, he quickly established himself as a formidable leader in a very large Registry operation. He is resourceful and constantly strives to improve office procedures in order to increase efficiency and provide better service. He is an old hand in the Registry field, well indoctrinated in proper procedure and knows when and how to adjust to meet changing situations.</p> <p style="margin-top: 20px;">Subject effectively supervises 8 employees and displays cost consciousness in the management and operation of his office.</p>			
SECTION D. CERTIFICATION AND COMMENTS			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
8 May 1967	/s/ [Redacted]		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
4			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
8 May 1967	Records Officer	/s/ [Redacted]	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Concur with rating and narrative comments. Subject is employing in this position his cumulative experience as a Registry supervisor at previous posts. Subject has contributed to the improvement of Registry procedures and in-country courier system of this large and fast moving station.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
15 May 1967	Ops Officer	/s/ [Redacted]	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME 		2. SEX M	3. GRADE GS-9	4. SSN b	
5. OFFICIAL POSITION TITLE Intel. Analyst - CH		6. OFF/DIV/BR OF ASSIGNMENT DDP/FE/Para		7. CURRENT STATION 	
8. CHECK (X) TYPE OF APPOINTMENT			9. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C) <input type="checkbox"/> SPECIAL (Specify)			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify)		
10. DATE REPORT DUE IN O.P.			11. REPORTING PERIOD (From - to) 30 Sept 65 - 1 Sept 1966		
SECTION B PERFORMANCE EVALUATION					
W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence. P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner. S - Strong Performance is characterized by exceptional proficiency. O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Chief of Central Registry and Records with responsibility for the receipt and routing of all incoming and outgoing cables, dispatches, and memoranda of the Station, including all other organizations corresponding with the Station.					RATING LETTER O
SPECIFIC DUTY NO. 2 Supervises six Registry employees					RATING LETTER S
SPECIFIC DUTY NO. 3 Supervises Station courier service which distributes classified correspondence to the Station.					RATING LETTER S
SPECIFIC DUTY NO. 4 Supervises the analysis and distribution of incoming and outgoing cables.					RATING LETTER S
SPECIFIC DUTY NO. 5 Supervises the operation of the Station Flexowriters.					RATING LETTER S
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

OFFICE OF THE

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective the relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

[] has continued to perform at a "Strong" level. He is a fine supervisor and thereby gets maximum performance from his staff which is too small to handle a work load which has constantly increased over the past year. He is cost conscious in funds material and also strives to stream-line and improve the functioning of the Registry and its related functions.

[] has twice been recommended for promotion. He definitely deserves it and should be assigned next to a position above his present rating.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

15 August 1966

[] /s/

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

14

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

16 August 1966

OFFICIAL TITLE OF SUPERVISOR

CPS. Officer

TYPED OR PRINTED NAME AND SIGNATURE

[] /s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur in above rating.

DATE

17 August 1966

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief of Station

TYPED OR PRINTED NAME AND SIGNATURE

[] /s/

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
			M	GS-09	D
6. OFFICIAL POSITION/TITLE Intel Analyst Ch		7. OFF/DIV/BR OF ASSIGNMENT DDP/FE/		8. CURRENT STATION	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify)		<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P. NOV 30 1965		12. REPORTING PERIOD (From - to) 1 July - 30 September 1965			
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Chief of Central Registry and Records with responsibility for the receipt and routing of all incoming and outgoing cables, dispatches, and memoranda of the Station, including all other organizations corresponding with the Station.					RATING LETTER O
SPECIFIC DUTY NO. 2 Supervises six Registry employees					RATING LETTER S
SPECIFIC DUTY NO. 3 Supervises Station courier service which distributes classified correspondence to the []					RATING LETTER S
SPECIFIC DUTY NO. 4 Analyze and distribute all incoming and outgoing Station cables.					RATING LETTER O
SPECIFIC DUTY NO. 5 Supervise the operation of the Station Flexowriter.					RATING LETTER S
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S
15 DEC 1965					

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position bearing perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of major or supervisory duties must be described, if applicable.

During the four months [] has been under my supervision he has demonstrated very real supervisory ability and a talent for getting maximum performance from a small staff which handles an increasingly large volume of work. He has also shown his ability to cut the costs of his operation.

[] not only runs a most efficient Registry but is also constantly seeking ways to improve and stream-line its operation. He is a man who takes such interest in his job that his ideas and plans for improvement are carefully worked out and sound.

Though I have observed his work for only four months, I believe his over-all performance is "Strong" and close to "Outstanding." He has been recommended for promotion. He deserves it.

Office of []
Dec 15 9 21 AM '65

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 27 October 1965	SIGNATURE OF EMPLOYEE /s/ []	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 4	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 27 October 1965	OFFICIAL TITLE OF SUPERVISOR Ops Officer	TYPED OR PRINTED NAME AND SIGNATURE /s/ []
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I agree with his supervisor that Subject is unusually competent in his field and fully deserving of a "Strong" rating. Subject displays unflagging enthusiasm for his job and constantly tries to improve his operation. He has displayed a high degree of imagination and inventiveness in making changes in our over-all CRR set-up. He very definitely deserves promotion.		
DATE 2 November 1965	OFFICIAL TITLE OF REVIEWING OFFICIAL DCOS	TYPED OR PRINTED NAME AND SIGNATURE /s/ []

SECRET

SECRET
(When Filled In)

1371

FITNESS REPORT			EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL				
1. NAME		2. GRADE	3. SSN	4. GRADE
		M	GS-09	n
5. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		
Intel Analyst Gen		DDP/PE		
8. CHECK (X) TYPE OF APPOINTMENT		9. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify)		<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE SPECIAL (Specify)		
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)		
		1 October 1964 - 30 June 1965		
SECTION B PERFORMANCE EVALUATION				
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>				
SPECIFIC DUTIES				
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).				RATING LETTER
SPECIFIC DUTY NO. 1 Chief of Central Registry and Records with responsibility for the receipt and routing of all incoming and outgoing cables, dispatches, and memoranda of the Station, including all other organizations corresponding with the Station				S
SPECIFIC DUTY NO. 2 Supervises six Registry employees				S
SPECIFIC DUTY NO. 3 Supervises Station courier service which distributes classified correspondence to the Station				S
SPECIFIC DUTY NO. 4 Analyzes and distributes all incoming and outgoing Station cables				O
SPECIFIC DUTY NO. 5 Supervises the Station Flexowriter				S
SPECIFIC DUTY NO. 6				RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION				
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				RATING LETTER
29 JUN 1965				S

SECRET
(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for rating ⁹⁰²¹⁷ promotion. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B in brief ^{brief} best ^{best} basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p> <p>As Chief of the Station Registry this employee continues to perform ⁹⁰²¹⁷ exceptionally proficient level with little supervision from his supervisor. His supervisor is ^{is} being reassigned and is scheduled to be replaced by another officer who will necessarily need several months to become knowledgeable of Registry activities. ⁹⁰²¹⁷ However there is no concern that the flow of paper and the maintenance of accurate records will be affected due to the turnover of supervisors. This employee continues to use his native ingenuity and high standards of achievement to ensure that his office continues to be a well run and efficient unit. He continues to ensure that no government funds are wasted, even to the extent of arranging for the construction of certain modifications to the Registry office by Registry employees at little cost to the Government. This employee has been performing at a level above his present GS-09 grade. As recommended in November 1964, it is recommended that this employee should be promoted to the next higher grade at the earliest possible opportunity.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
4 June 65	/s/ [Signature]		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
45			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
4 June 65	Cpc Officer	/s/ [Signature]	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
Subject takes his job seriously and performs it in strong fashion. I would say that he displays more energy, interest, and continuing attention than just about anyone else I've seen in registry-type work.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
10 June 65	DCGS	/s/ [Signature]	

SECRET

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX M	4. GRADE GS-09	5. SD D
6. OFFICIAL POSITION TITLE Intel Analyst Gen		7. OFF/DIV. BR OF ASSIGNMENT DDP/FE/		8. CURRENT STATION	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify)		<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P. 30 Nov 64		12. REPORTING PERIOD (From - to) 1 October 1963 - 30 September 1964			
SECTION B PERFORMANCE EVALUATION					
W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence. P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner. S - Strong Performance is characterized by exceptional proficiency. O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 Chief of Central Registry and Records with responsibility for the receipt and routing of all incoming and outgoing cables, dispatches, and memoranda of the Station, including all other organizations corresponding with the Station					S
SPECIFIC DUTY NO. 2 Supervises six Registry employees					S
SPECIFIC DUTY NO. 3 Supervises Station courier service which distributes classified correspondence to the Station					S
SPECIFIC DUTY NO. 4 Analyzes and distributes all incoming and outgoing Station cables					S
SPECIFIC DUTY NO. 5 Supervises the Station Flexewriter					S
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

~~SECRET~~

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties, as prescribed, if applicable.

This employee continues to be Chief of the Station Registry. During the past year his level of performance can be properly evaluated as exceptionally proficient. He continues to welcome hard work, is not bothered by constantly changing deadlines and is able to fill in for any absent member of his unit, and keep up his own work as well. He is quite conscious of the value of Government personnel and materiel, and does everything in his power to conserve these resources. He continues to come up with new ideas on how to perform his functions in a more efficient and effective manner. This results in benefits to the entire Station. It is regrettable that the position this employee fills does not allow for promotion since he has been performing at a level above his present grade for several years.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

1 Oct 64

SIGNATURE OF EMPLOYEE

/s/

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

1 Oct 64

OFFICIAL TITLE OF SUPERVISOR

Ops Officer

TYPED OR PRINTED NAME AND SIGNATURE

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I fully concur with the rater's comments and sentiments. I have known this employee for a number of years during which time he has evidenced real growth in self-sufficiency and also in the handling of his responsibilities as a supervisor.

DATE

29 Oct 64

OFFICIAL TITLE OF REVIEWING OFFICIAL

COS

TYPED OR PRINTED NAME AND SIGNATURE

/s/ William V. Broe

~~SECRET~~
CONFIDENTIAL

CONFIDENTIAL
SECRET
(When Filled In)

ATT TO FJTT-10860

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
<div style="display: flex; justify-content: space-between;"> <div> SECTION A 1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SEX 4. GRADE 5. SD </div> <div> GENERAL 6. OFFICIAL POSITION TITLE 7. OFF. DIVISION OF ASSIGNMENT 8. CURRENT STATION 9. CHECK (X) TYPE OF APPOINTMENT 10. CHECK (X) TYPE OF REPORT 11. DATE REPORT DUE IN O.P. 12. REPORTING PERIOD (From to) </div> </div>							
Intel Analyst Gen DDP/FE/							
XX CAREER RESERVE TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):						REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE SPECIAL (Specify):	
30 November 1963 1 Oct 62-30 Sep 63							
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p>							
SPECIFIC DUTY NO. 1 Chief of Central Registry and Records with responsibility for the receipt and routing of all incoming and outgoing cables, dispatches, and memoranda of the Station, including all other organizations corresponding with the Station.						RATING LETTER S	
SPECIFIC DUTY NO. 2 Supervises six Registry employees						RATING LETTER P	
SPECIFIC DUTY NO. 3 Supervises Station courier service which distributes classified correspondence to the Station.						RATING LETTER P	
SPECIFIC DUTY NO. 4 Analyzes and distributes all incoming and outgoing Station cables.						RATING LETTER P	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S	

CONFIDENTIAL
SECRET

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

As Chief of the [] Station Registry, this employee has performed at a level of exceptional proficiency for the past year. He welcomes hard work, is able to fill in for any absent member of his unit and keep up his own work as well. He continues to bring up ideas for the improvement of his unit. These have been particularly welcome during the past year in view of the impending move of the Registry to a new location []. The slight tendency to be arbitrary mentioned in the last fitness report has been eliminated during this reporting period. In view of this employee's strong performance over the past year, he is being recommended for promotion to GS-10.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
10 Sept. 63	/s/ []	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
10 Sept. 63	Chief, Ops Support Staff	/s/ []
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
<p>I concur in this rating and add that this employee has not let the very serious personal problems thrust upon him during this period interfere in any way with his consistently dependable performance. In this key role, in any station of this size, dependability, reliability, and confidence are "musts" and while there are quite naturally small aggravating incidents of mis-routing or mis-direction of documents, I have been struck by the lack of them here, because ratee has the "must" qualities. His performance certainly warrants favorable consideration of the projected promotion action.</p>		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
11 September 63	Deputy Chief of Station	[]

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX M	4. GRADE GS-9
5. OFFICIAL POSITION TITLE Intel Analyst		6. OFF. DIV/BR OF ASSIGNMENT DDP/FE		7. CURRENT STATION	
8. CHECK (X) TYPE OF APPOINTMENT		9. CHECK (X) TYPE OF REPORT			
CAREER		RESERVE		TEMPORARY	
CAREER-PROVISIONAL (See Instructions - Section C)		X ANNUAL		REASSIGNMENT SUPERVISOR	
SPECIAL (Specify):		SPECIAL (Specify):		REASSIGNMENT EMPLOYEE	
11. DATE REPORT DUE IN G.P.		12. REPORTING PERIOD (From - to) 1 Oct 61 - 30 Sept 62			
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Chief of Central Registry and Records with responsibility for the receipt, analysis and routing of all incoming and outgoing cables, dispatches and memoranda of the Station, including all other organizations corresponding with the Station.					RATING LETTER P
SPECIFIC DUTY NO. 2 Supervises four Registry employees.					RATING LETTER P
SPECIFIC DUTY NO. 3 Supervises a courier service which distributes correspondence to the [] Station.					RATING LETTER P
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER P

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

As the Chief of the Registry this employee has performed well. He has abundant energy and constantly comes up with ideas for the improvement of the efficiency of his unit. He welcomes hard work and is able to fill in and take over any job in his unit and keep up with his own duties as well. As a supervisor, he has a slight tendency to be arbitrary when convinced he is right. This may be due to the fact that the Registry frequently operates under conditions of pressure due to the recent reorganization, reduction, and relocation of the Station. The Station has been required to get the job done with fewer people and under more difficult working conditions.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

25 Oct. 1962

SIGNATURE OF EMPLOYEE

/s/

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Subject has done and continues to do well what is expected of him. In amplification of the last sentence of the rater's comments (Section C) Subject has made the adjustment to "fewer people" and "more difficult working conditions" quite well, without trouble and more importantly with no impediment to the CRM service.

DATE

26 Oct 1962

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER CSPD		
SECTION A GENERAL						
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX	
					M GS-9	
4. SERVICE DESIGNATION, 5. OFFICIAL POSITION TITLE				7. OFF/DIV/BR OF ASSIGNMENT		
D Ops Officer				STATION		
6. CAREER STAFF STATUS			8. TYPE OF REPORT			
<input type="checkbox"/> NOT ELIGIBLE <input type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT/SUPERVISOR			
<input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE			
10. DATE REPORT DUE IN O.F.		11. REPORTING PERIOD		12. SPECIAL (Specify)		
		From 15 Apr 61-30 Sep 61 To				
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES						
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).						
1 - Unsatisfactory 2 - Barely adequate 3 - Acceptable 4 - Competent 5 - Excellent 6 - Superior 7 - Outstanding						
SPECIFIC DUTY NO. 1		RATING NO.		SPECIFIC DUTY NO. 4		
Chief of local registry, supervising four persons.		4				
SPECIFIC DUTY NO. 2		RATING NO.		SPECIFIC DUTY NO. 5		
SPECIFIC DUTY NO. 3		RATING NO.		SPECIFIC DUTY NO. 6		
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION						
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.						
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.					RATING NO. 4	
SECTION D DESCRIPTION OF THE EMPLOYEE						
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee						
1 - Least possible degree 2 - Limited degree 3 - Normal degree 4 - Above average degree 5 - Outstanding degree						
CHARACTERISTICS				NOT APPLICABLE	NOT OBSERVED	RATING
						1 2 3 4 5
GETS THINGS DONE						
RESOURCEFUL						
ACCEPTS RESPONSIBILITIES						
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES						
DOES HIS JOB WITHOUT STRONG SUPPORT						
FACILITATES SMOOTH OPERATION OF HIS OFFICE					X	
WRITES EFFECTIVELY					X	
SECURITY CONSCIOUS						
THINKS CLEARLY						
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS						
OTHER (Specify):						

SEE SECTION "E" ON REVERSE SIDE

SECRET

OFFICE OF PERSONNEL

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide basis for determining future personnel actions.

Ratee has been in charge of station registry since 24 April 61. This has been a period of dramatic change in the station and especially in our paper management. He has responded well to these changes and shows a degree of adaptability that bodes well. His handling of our recent "holdings" inventory, his unceasing efforts to reduce unnecessary holdings, and his knowledge of his business (RI) have made him a valued addition to our shrinking team. In this short rating period there has been little opportunity for me to observe his supervisory abilities, but the lack of any problem on this count coming to my attention seems to me that he is doing well. Another six months should tell us more on this score.

SECTION F

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE

6 Oct 61

SIGNATURE OF EMPLOYEE

[Signature]

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 30 DAYS

REPORT MADE WITHIN LAST 30 DAYS

OTHER (Specify):

DATE

6 Oct 61

OFFICIAL TITLE OF SUPERVISOR

[Signature]

TYPED OR PRINTED NAME AND SIGNATURE

3.

BY REVIEWING OFFICIAL

I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.

I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.

I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.

I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE

6 Oct 61

OFFICIAL TITLE OF REVIEWING OFFICIAL

[Signature]

TYPED OR PRINTED NAME AND SIGNATURE

SECRET

SECRET
(When Filled In)

20 DEC 1960

2 FEB 1961 FITNESS REPORT		EMPLOYEE SERIAL NUMBER <div style="border: 1px solid black; height: 20px; width: 100px;"></div>	
SECTION A GENERAL			
1. NAME		3. SEX	4. GRADE
		1.	GS-9
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE	
DI		Records Management Officer	
		7. OFF/DIV/BR OF ASSIGNMENT	
		DDP/IE/Secretariat	
8. CAREER STAFF STATUS		9. TYPE OF REPORT	
<input type="checkbox"/> NOT ELIGIBLE <input checked="" type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED		<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT/SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE	
10. DATE REPORT DUE IN O.P.		11. REPORTING PERIOD	
31 October 1960		From Sep 57 - 30 Sep 60 To	
		SPECIAL (Specify)	
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES			
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).			
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent
5 - Excellent	6 - Superior	7 - Outstanding	
SPECIFIC DUTY NO. 1 Liaison with RID, DDP/RMO, DDP/MCU, other Division records officers, etc., re implementation of DDP records management program		SPECIFIC DUTY NO. 4 Assistance to FE personnel in problems of retention and retirement of records <i>DC 54</i>	RATING NO. 6
SPECIFIC DUTY NO. 2 Training and assistance to FE personnel in records management procedures		SPECIFIC DUTY NO. 5 Guidance to field records officers	RATING NO. 5
SPECIFIC DUTY NO. 3 Planning and development of Division vital materials program		SPECIFIC DUTY NO. 6 Implementation of various records purges and records programs	RATING NO. 5
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION			
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.			
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.			RATING NO. <div style="border: 1px solid black; padding: 5px; text-align: center;">5</div>
SECTION D DESCRIPTION OF THE EMPLOYEE			
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee			
1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree
5 - Outstanding degree			
CHARACTERISTICS		NOT APPLICABLE	NOT OBSERVED
		RATING	
		1	2
		3	4
		5	
DOES THINGS DONE			X
RESOURCEFUL			X
ACCEPTS RESPONSIBILITIES			X
CAN MAKE DECISIONS ON HIS OWN WHEN NEEDED ARISES			X
DOES HIS JOB WITHOUT STRONG SUPPORT			X
FACILITATES SMOOTH OPERATION OF HIS OFFICE			X
WRITES EFFECTIVELY			X
SECURITY CONSCIOUS			X
THINKS CLEARLY			X
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS			X
OTHER (Specify):			

SEE SECTION "E" ON REVERSE SIDE

SECRET

(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and his ability to accept greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Subject is an excellent records officer. His interest in the subject and his perseverance in carrying out tasks connected with it have not only produced results in his own work, but have kindled enthusiasm and interest within the Division in developments in Agency records management. He has been able to improve records within the Division with a great deal of success, and at the same time avoided the usual aversion to records responsibility which too much emphasis on records creates in the case officer. His ability to get along well with others is important in his liaison function.

Subject's work on the vital materials program in the last year has resulted in a much more realistic program for the Division. The creation and ~~retention~~ up-to-date retention of vital materials has for some time been a problem for which little solution could be found. It appears that the present program will result in vital materials which will be current and usable if needed.

Subject is at present assigned to a part-time detail in MMU. This should help to broaden his knowledge of new approaches in the records field. A/EXO/DDP has expressed his complete satisfaction with the very effective work subject is doing on this detail.

Subject's work during the last year was the basis for a commendation of the Division's records program by CDP.

SECTION F CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE 16 DEC 1960

SIG

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

20

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS

REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

DATE

16 December 1960

OFFICIAL TITLE OF SUPERVISOR

C/FE/ESEC

TYPED OR PRINTED NAME AND SIGNATURE

3. BY REVIEWING OFFICIAL

☒ I COULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.

☐ I COULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.

☐ I COULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.

☐ I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

FE/EXO

TYPED OR PRINTED NAME AND SIGNATURE

SECRET

SECRET
(When Filled In)

Record
6020

1 JUL 1959

FITNESS REPORT				EMPLOYEE SERIAL NUMBER <div style="border: 1px solid black; width: 100px; height: 20px;"></div>										
SECTION A GENERAL														
1. NAME <div style="border: 1px solid black; width: 100%; height: 20px;"></div>				3. SEX M		4. GRADE AS-9								
5. SERVICE DESIGNATION DI				6. OFFICIAL POSITION TITLE Records Mgmt Officer		7. OFF/DIV/BR OF ASSIGNMENT AF/FE/5 Southern								
8. CAREER STAFF STATUS MEMBER				9. TYPE OF REPORT INITIAL										
NOT ELIGIBLE				REASSIGNMENT/SUPERVISOR										
PENDING				REASSIGNMENT/EMPLOYEE										
10. DATE REPORT DUE IN O.P. 31 October 1959				11. REPORTING PERIOD From 58-50 Sep 59 To										
				SPECIAL (Specify)										
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES														
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).														
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>1 - Unsatisfactory</td> <td>2 - Barely adequate</td> <td>3 - Acceptable</td> <td>4 - Competent</td> <td>5 - Excellent</td> <td>6 - Superior</td> <td>7 - Outstanding</td> </tr> </table>								1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding								
SPECIFIC DUTY NO. 1 Liaison with RID, DDP/RMO, DDP/MMU, other Division records officers, etc, re implementation of records mgt program			RATING NO. 6	SPECIFIC DUTY NO. 4 Assistance to FE personnel in problems of retention and retirement of records			RATING NO. 5							
SPECIFIC DUTY NO. 2 Training and assistance for FE personnel in records mgt procedures			RATING NO. 4	SPECIFIC DUTY NO. 5 Guidance to field records officers			RATING NO. 6							
SPECIFIC DUTY NO. 3 Planning and development of Division vital materials program			RATING NO. 4	SPECIFIC DUTY NO. 6 Guidance in all records problems			RATING NO. 5							
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION														
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.														
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.							RATING NO. 5							
SECTION D DESCRIPTION OF THE EMPLOYEE														
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee														
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>1 - Least possible degree</th> <th>2 - Limited degree</th> <th>3 - Normal degree</th> <th>4 - Above average degree</th> <th>5 - Outstanding degree</th> </tr> </table>								1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree		
1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree										
CHARACTERISTICS					NOT APPLICABLE	NOT SERVED	RATING							
					1	2	3	4	5					
GETS THINGS DONE									X					
RESOURCEFUL									X					
ACCEPTS RESPONSIBILITIES									X					
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES								X						
DOES HIS JOB WITHOUT STRONG SUPPORT								X						
FACILITATES SMOOTH OPERATION OF HIS OFFICE								X						
WRITES EFFECTIVELY							X							
SECURITY CONSCIOUS									X					
THINKS CLEARLY								X						
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS									X					
OTHER (Specify):														

SEE SECTION "E" ON REVERSE SIDE

SECRET
(When Filled In)

OFFICE OF PERSONNEL

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the basis for determining future personnel actions.

Subject is an excellent records officer. He is enthusiastic about his specialty and works hard at it, putting a great deal of energy into his work.

He is quick and understands records thoroughly. Because of this, he is at times inclined to jump ahead of others in records discussions and should attempt to slow down his approach to the subject to meet the level of persons who do not have the same records background.

Subject could fill any position in the records management field, and should advance quickly. He is interested in developing his capabilities and is at present enrolled in the Writing Workshop with this in mind.

This report has been prepared in accordance with FE Division standards which recognize the individual against the group. Thus an "average" rating reflects an entirely satisfactory performance.

SECTION F

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I certify that I have seen Sections A, B, C, D and E of this Report.		
DATE 29 Oct 59	SIGNATURE [Signature]	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 7	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.		
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS	REPORT MADE WITHIN LAST 90 DAYS	
OTHER (Specify):		
DATE 27 October 1959	OFFICIAL TITLE OF SUPERVISOR C/FE/ESEC	SIGNATURE [Signature]
3. BY REVIEWING OFFICIAL		
<input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION. <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION. <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION. <input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.		
COMMENTS OF REVIEWING OFFICIAL: Subject is a promising young records officer. He has demonstrated a capability for growth and for assuming greater responsibility. He is very much interested in records management and wants to make a career of it. His career development should be designed to afford him opportunities for maximum development both in terms of varied Headquarters experience and in field assignments.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL FE/EXO	SIGNATURE [Signature]

SECRET

SECRET

(When Filled In)

FF-25

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in Item B, of Section "A" below.

SECTION A.

GENERAL

1. NAME		3. SEX	4. SERVICE DESIGNATION
5. OFFICE DIVISION BRANCH OF ASSIGNMENT		6. OFFICIAL DIVISION TITLE	
DDP/		H. DT	
7. GRADE		8. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-7		21 August 1958 - 4 Sept. 1958	
9. DATE REPORT DUE IN DP		21 August 1958 - 4 September 1958	
10. TYPE OF REPORT (Check one)		11. SPECIAL (Specify)	
INITIAL		REASSIGNMENT SUPERVISOR	
ANNUAL		REASSIGNMENT EMPLOYEE	
		X For TDY Period	

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☐ HAS ☒ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

Subject left station

A. CHECK (X) APPROPRIATE STATEMENTS:

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "C" OR "D", A WARNING LETTER WAS SENT TO HIM OR A COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS HOW HE STANDS.	

B. THIS DATE	C. SUPERVISOR'S OFFICIAL TITLE
18 Sept 1958	1st of Station,

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY	DATE
<i>[Signature]</i>	<i>[Date]</i>

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE	B. TYPE IN PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
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SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

5 INSERT RATING NUMBER	1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
	2. BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
	3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
	4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
	5. A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.

6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS: This rating covers the period 21 August - 4 September 1958, while subject was surveying Station files and installing new RI standardized filing system.

SECRET

2. RATINGS IN PERFORMANCE OF SPECIFIC DUTIES		OFFICE OF PERSONNEL	
<p>DIRECTIONS:</p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during this period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate supervisors those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same or at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p>ORAL BRIEFING</p> <p>GIVING LECTURES</p> <p>CONDUCTING SEMINARS</p> <p>WRITING TECHNICAL REPORTS</p> <p>CONDUCTING EXTERNAL LIAISON</p> <p>TYPIST</p> <p>TAKING DICTATION</p> <p>SUPERVISING</p> </div> <div style="width: 30%;"> <p>HAS AND USES AREA KNOWLEDGE</p> <p>DEVELOPS NEW PROGRAMS</p> <p>ANALYZES INDUSTRIAL REPORTS</p> <p>MANAGES FILES</p> <p>OPERATES RADIO</p> <p>COORDINATES WITH OTHER OFFICES</p> <p>WRITES REGULATIONS</p> <p>PREPARES CORRESPONDENCE</p> </div> <div style="width: 30%;"> <p>CONDUCTS INTERVIEWS</p> <p>PREPARES SUMMARIES</p> <p>TRANSLATES GERMAN</p> <p>DEBRIEFING SOURCES</p> <p>KEEPS BOOKS</p> <p>DRIVES TRUCK</p> <p>MAINTAINS AIR CONDITIONING</p> <p>EVALUATES SIGNIFICANCE OF DATA</p> </div> </div> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>			
<p>DESCRIPTIVE RATING NUMBER</p>	<p>1. INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</p> <p>2. BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</p> <p>3. PERFORMS THIS DUTY ACCEPTABLY</p> <p>4. PERFORMS THIS DUTY IN A COMPETENT MANNER</p> <p>5. PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</p>	<p>6. PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS DOING SIMILAR JOBS</p> <p>7. EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</p>	
<p>SPECIFIC DUTY NO. 1</p>	<p>RATING NUMBER</p> <p>5</p>	<p>SPECIFIC DUTY NO. 4</p> <p>Develops new Programs</p>	<p>RATING NUMBER</p> <p>5</p>
<p>SPECIFIC DUTY NO. 2</p>	<p>RATING NUMBER</p> <p>5</p>	<p>SPECIFIC DUTY NO. 5</p> <p>Manages Files</p>	<p>RATING NUMBER</p> <p>5</p>
<p>SPECIFIC DUTY NO. 3</p>	<p>RATING NUMBER</p> <p>5</p>	<p>SPECIFIC DUTY NO. 6</p> <p>Oral Briefing</p>	<p>RATING NUMBER</p> <p>5</p>
<p>3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE</p> <p>DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job</p> <p>STRENGTHS: Ability to see another's viewpoint and to work out satisfactory compromises between the RI system and operational requirements of the [] station.</p> <p>WEAKNESSES: None observed.</p>			
<p>SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION</p> <p>DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the past, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Share your opinion with others doing similar work of about the same level.</p> <div style="display: flex;"> <div style="width: 10%; text-align: center;"> <p>5</p> <p>RATING NUMBER</p> </div> <div style="width: 90%;"> <p>1. DEFINITELY UNSUITABLE. HE SHOULD BE SEPARATED</p> <p>2. OF DOUBTFUL SUITABILITY. I SHOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</p> <p>3. A BARELY ACCEPTABLE EMPLOYEE...BETTER AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</p> <p>4. OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</p> <p>5. A FINE EMPLOYEE. HAS SOME OUTSTANDING STRENGTHS</p> <p>6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</p> <p>7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</p> </div> </div> <p>IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YES, EXPLAIN FULLY:</p>			

SECRET

SECRET

(When Filled In)

25

PWA

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section A below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
		M	DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION/TITLE	
		Records Management Analyst	
7. GRADE	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-7		8 December 1957 - September 1958	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	Promotion

SECTION B.

CERTIFICATION

1. FOR THE RATER, THIS REPORT ☐ WAS ☒ HAD NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

Absent from Station. Will be shown upon return.

A. CHECK (X) APPROPRIATE STATEMENTS:

<input type="checkbox"/>	THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	<input type="checkbox"/>	IF INDIVIDUAL IS RATED "I" IN CI OR D, A WARNING LETTER HAS BEEN SENT TO HIM AS A COPY ATTACHED TO THIS REPORT.
<input checked="" type="checkbox"/>	THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS SEE ATTACHED REPORTS	<input type="checkbox"/>	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input type="checkbox"/>	I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	<input checked="" type="checkbox"/>	Will upon return to Station.

8. THIS DATE	9. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	10. SUPERVISOR'S OFFICIAL TITLE
4 Sept 1958		C/Amin

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY	DATE
H. B.	10/20/58
CONTINUED ON ATTACHED SHEET	

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
4 Sept 1958	George E. Aurell	COG

SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

- 5
1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPLIANT.
 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
 4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS

SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES																											
<p>DIRECTIONS:</p> <p>a. State in the spaces below (a) to six of the more important SPECIFIC duties performed by this rating person. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table border="0"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERROGATIONS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS																									
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES																									
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TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK																									
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING																									
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA																									
<p>DESCRIPTIVE RATING NUMBER</p> <table border="0"> <tr> <td>1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</td> <td>6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</td> </tr> <tr> <td>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</td> <td>7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</td> </tr> <tr> <td>3 - PERFORMS THIS DUTY ACCEPTABLY</td> <td></td> </tr> <tr> <td>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER</td> <td></td> </tr> <tr> <td>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</td> <td></td> </tr> </table>				1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS	2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY	7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY	3 - PERFORMS THIS DUTY ACCEPTABLY		4 - PERFORMS THIS DUTY IN A COMPETENT MANNER		5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB															
1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS																										
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3 - PERFORMS THIS DUTY ACCEPTABLY																											
4 - PERFORMS THIS DUTY IN A COMPETENT MANNER																											
5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB																											
SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER																								
Supervises 2 Records Mgm. Analysts	5	Processes files in accordance with Specific Records System	6																								
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER																								
Devises Records Systems to suit Station needs.	6																										
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER																								
Trains Station personnel in Records maintenance.	5																										
3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE																											
<p>DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>Strengths: Works hard and fast. Able to analyze problems and organize work of Records Management Team in methodical sequence.</p> <p>Weaknesses: No notable weaknesses.</p>																											
SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION																											
<p>DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <p>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</p> <p>2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</p> <p>3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</p> <p>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</p> <p>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</p> <p>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</p> <p>7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</p>																											
<p>IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>EXPLAIN FULLY:</p>																											

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CE no later than 30 days after the due date indicated in item 8 of Section "B" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
		M	DE
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
		Records Management Analyst	
7. GRADE	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
08-7		8 December 1957 - September 1958	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	Promotion

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
1 Sept. 1958		C/Adm
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
1 Sept. 1958	George E. Aurell	COB

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

6	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
	7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

RATING NUMBER

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☐ Yes ☐ No If your answer is YES, indicate below your opinion as to the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "Actual" column. If based on opinion of his potential, note the rating in the "Potential" column.

DESCRIPTIVE RATING NUMBER	DESCRIPTION
0	HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION
1	BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION
2	BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION
3	BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION

ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
3		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) under contact with immediate subordinates is frequent (First line supervisor)
	3	A GROUP OF SUPERVISORS WHO PERFORM THE BASIC JOB (Second line supervisors)
	0	A GROUP, AND NOT TO BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)
	2	UNDER CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
3		UNDER IMMEDIATE SUPERVISOR'S ATTENTION ARE DIVERSE AND NEED CAREFUL COORDINATION
	3	UNDER IMMEDIATE SUPERVISOR'S ATTENTION INCLUDE MEMBERS OF THE OPPOSITE SEX
		Other (Specify)

SECRET

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATEE EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION 6 months	OFFICE OF PERSONNEL <div style="text-align: right; font-size: 1.2em;"> Oct 14 9 17 AM '58 </div> <div style="text-align: right;"> MAIL ROOM </div>
4. COMMENTS CONCERNING POTENTIAL	

SECTION II. 1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL None planned nor available while on current overseas tour.	FUTURE PLANS
2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS Subject single and willing serve geographic locations. Believe subject performs best in demanding assignments.	

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL

CATEGORY NUMBER

1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
3	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	5	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
3	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITIES	5	23. IS THOUGHTFUL OF OTHERS
4	4. IS ANALYTIC IN HIS THINKING	3	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
5	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGEMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	3	26. IS SECURITY CONSCIOUS
5	7. CAN GET ALONG WITH PEOPLE	5	17. COMES UP WITH SOLUTIONS TO PROBLEMS	3	27. IS VERSATILE
4	8. HAS MEMORY FOR FACTS	3	18. IS OBSERVANT	3	28. HIS CRITICISM IS CONSTRUCTIVE
4	9. GETS THINGS DONE	3	19. THINKS CLEVERLY	4	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
X	10. CAN Cope WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN ALLOCABLE TIME LIMITS	5	30. DOES NOT RESIST STRONG AND CONTINUOUS SUPERVISION

SECRET

SECRET

(When Filled In)

FF-35 20 SEP 58

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-376. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section A below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
7. GRADE	8. DATE REPORT DUE IN 'OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 4 April - 30 June 1958	
10. TYPE OF REPORT (Check one)	INITIAL	PERMANENT SUPERVISOR	SPECIAL (Specify) T.D.Y.
	ANNUAL	REASSIGNMENT EMPLOYEE	

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☐ HAS ☒ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.
Report prepared after subject departed this station

A. CHECK (X) APPROPRIATE STATEMENTS:

<input type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "C" OR "D", A WARNING LETTER HAS BEEN SENT TO HIM-DA COPY ATTACHED TO THIS REPORT.
<input checked="" type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND OTHER SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

B. THIS DATE

10 July 1958

C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR

D. SUPERVISOR'S OFFICIAL TITLE

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY	DATE
<i>[Signature]</i>	11 OCT 1958
10/20/58	

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
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SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

6	1. DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT. 2. BRIEFLY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES. 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY REVEALS SOME AREA OF WEAKNESS. 4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER. 5. A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL. 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.
---	--

COMMENTS:

SECRET

(When Filled In)

OFFICE OF PERSONNEL

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

- a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.
- b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.
- c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisor if these who supervise a secretary only).
- d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- f. Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING

GIVING LECTURES

CONDUCTING SEMINARS

WRITING TECHNICAL REPORTS

CONDUCTING EXTERNAL LIAISON

TYPING

TAKING DICTATION

SUPERVISING

HAS AND USES AREA KNOWLEDGE

DEVELOPS NEW PROGRAMS

ANALYZES INDUSTRIAL REPORTS

MANAGES FILES

OPERATES RADIO

COORDINATES WITH OTHER OFFICES

WRITES REGULATIONS

PREPARES CORRESPONDENCE

CONDUCTS INTERROGATIONS

PREPARES SUMMARIES

TRANSLATES GERMAN

DEBRIEFING SOURCES

KEEPS BOOKS

DRIVES TRUCK

MAINTAINS AIR CONDITIONING

EVALUATES SIGNIFICANCE OF DATA

- g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

DESCRIPTIVE
RATING
NUMBER

- 1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY
- 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY
- 3 - PERFORMS THIS DUTY ACCEPTABLY
- 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER
- 5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB

- 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS
- 7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY

SPECIFIC DUTY NO. 1

Analysis of records problems and establishing records procedures

RATING
NUMBER
6

SPECIFIC DUTY NO. 2

Supervising

RATING
NUMBER
6

SPECIFIC DUTY NO. 3

SPECIFIC DUTY NO. 3
Keeping his own records and reporting on work progress.RATING
NUMBER
5

SPECIFIC DUTY NO. 4

RATING
NUMBERRATING
NUMBERRATING
NUMBER

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.

Subject analyzed difficult records problems quickly and precisely, discussed his recommendations forcefully and convincingly, and then proceeded to put them into effect with considerable energy. He not only supervised his subordinates effectively so that every minute was productive, but did a good share of the routine work himself, making certain that everything was done precisely as planned.

SECTION D.

SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.

- 1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED
- 2 - OF DOUBTFUL SUITABILITY...COULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW
- 3 - A BARELY ACCEPTABLE EMPLOYEE...BETTER AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION
- 4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION
- 5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS
- 6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION
- 7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION

6

RATING
NUMBER

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION?

YES ☒ NO ☐ IF YES, EXPLAIN FULLY:

SECRET

SECRET

(When Filled In)

29 SEP 1958

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the OI no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
7. GRADE	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
4 April - 30 June 1958			
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	T.D.Y.

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
10 July 1958		
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
10 July 1958		

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
 DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

6	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
	7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION		
3		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) whose contact with immediate subordinates is frequent (First line supervisor)		
	3	A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)		
	0	A GROUP, WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)		
	3	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT		
	3	WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION		
	0	WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX		
	0	Other (Specify)		

SECRET

(When Filled In)

OFFICE OF PERSONNEL

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION **Three**

4. COMMENTS CONCERNING POTENTIAL

From subject's performance here it appears that his potential in the records management field may be limited only by his lack of formal higher education, and that even in this respect he could overcome this deficiency with some training. His forcefulness and boundless energy would unquestionably inspire any subordinates to higher performance. He has an intense interest in records work and an ability to grasp complex problems and make quick decisions.

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

None

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

None

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

X = HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL

CATEGORY NUMBER

- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
- 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
- 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
- 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
- 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
3	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	5	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	5	21. IS EFFECTIVE IN DISCUSSING WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	3	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITY	3	23. IS THOUGHTFUL OF OTHERS
4	4. IS ANALYTIC IN HIS THINKING	3	14. ADMITS HIS ERRORS	5	24. DOES WELL UNDER PRESSURE
5	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	3	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGMENT
5	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	3	26. IS SECURITY CONSCIOUS
5	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	X	27. IS VERSATILE
5	8. HAS MEMORY FOR FACTS	4	18. IS OBTUNDANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. GETS THINGS DONE	5	19. THINKS CLEARLY	4	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
X	10. CAN COPE WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	5	30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET

SECRET

(When Filled)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-170. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8. of Section "A" below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
		M	SD: DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
FI RI ARO		OS-0132.35-7 Intel Analyst	
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
OS-7		21 January 1957 - 15 July 1957	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	X REASSIGNMENT-EMPLOYEE	

SECTION B.

CERTIFICATION

3. FOR THE RATER: THIS REPORT ☒ HAS ☒ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY.

NOT: ☐ is on temporary duty

A. CHECK (X) APPROPRIATE STATEMENTS:

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "1" IN C1 OR D, A WARNING LETTER WAS SENT TO HIM & A COPY ATTACHED TO THIS REPORT.
THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

4. THIS DATE
22 July 1957

SUPERVISOR'S OFFICIAL TITLE
Coordinator, 201 Control Unit,
RI/Analysis Section

5. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY DATE
Posted Pos. Control 20 7/23/57
Reviewed by PUD D. L. REEDY 10-8-57

CONTINUED ON ATTACHED SHEET

I certify that any substantial

error is reflected in the above section.

A. THIS DATE
22 July 1957

B. TYPED
OFFIC

REVIEWING C. OFFICIAL TITLE OF REVIEWING OFFICIAL
Supervisor, RI/Analysis Section

SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

1. DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS: ☐ departed for temporary duty on 9 Feb 1957. His last Fitness Report was completed on 5 Feb 1957, just prior to his departure. Reports from the station indicate he is doing a commendable job.

AUG 16 3:19 PM '57

SECRET

(when filled in)

2. RATINGS ON PERFORMANCE OF MAINTENANCE PERSONNEL																											
<p>DIRECTIONS:</p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise is rated as a specific duty (do not rate as supervisors those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table border="0"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERROGATIONS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS																									
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES																									
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN																									
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CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS																									
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK																									
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING																									
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA																									
<p>DESCRIPTIVE RATING NUMBER</p>	<p>1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</p> <p>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</p> <p>3 - PERFORMS THIS DUTY ACCEPTABLY</p> <p>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER</p> <p>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</p>	<p>6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</p> <p>7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</p>																									
SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER																								
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER																								
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER																								
<p>3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE</p> <p>DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.</p>																											
<p>SECTION 2. SUITABILITY FOR CURRENT JOB IN ORGANIZATION</p> <p>DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <table border="0"> <tr> <td rowspan="7"> <p>RATING NUMBER</p> </td> <td>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</td> </tr> <tr> <td>2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</td> </tr> <tr> <td>3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</td> </tr> <tr> <td>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</td> </tr> <tr> <td>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</td> </tr> <tr> <td>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</td> </tr> <tr> <td>7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</td> </tr> </table> <p>IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YES, EXPLAIN FULLY:</p>				<p>RATING NUMBER</p>	1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED	2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW	3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION	4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION	5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS	6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION	7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION																
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	2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW																										
	3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION																										
	4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION																										
	5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS																										
	6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION																										
	7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION																										

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, held and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CF no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX M	4. SERVICE DESIGNATION SD: DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT FI RI A&O		6. OFFICIAL POSITION/TITLE GS-0132.35-7 Intel Analyst	
7. GRADE GS-7	8. DATE REPORT DUE IN CP	9. PERIOD COVERED BY THIS REPORT (inclusive dates) 21 January 1957 - 15 July 1957	
10. TYPE OF REPORT (Check one)	SPECIAL (Specify)		
INITIAL	REASSIGNMENT-SUPERVISOR		
ANNUAL	REASSIGNMENT-EMPLOYEE		

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

RATING NUMBER	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL

7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☐ Yes ☐ No. If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION		
		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) where contact with immediate subordinates is frequent (First line supervisors)		
		A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)		
		A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)		
		WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT		
		WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION		
		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX		
		OTHER (Specify)		

SECRET
(When Filled-In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS SINCE INDIVIDUAL HAS BEEN UNDER YOUR SUPERVISION

APR 16 3 19 PM '57

4. COMMENTS CONCERNING POTENTIAL

MAIL ROOM

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

- X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
- CATEGORY NUMBER**
- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
 - 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
 - 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
 - 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
 - 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
	1. ABLE TO SEE ANOTHER'S POINT OF VIEW		11. HAS HIGH STANDARDS OF ACCOMPLISHMENT		21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES		12. SHOWS ORIGINALITY		22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
	3. HAS INITIATIVE		13. ACCEPTS RESPONSIBILITIES		23. IS THOUGHTFUL OF OTHERS
	4. IS ANALYTIC IN HIS THINKING		14. ADMITS HIS ERRORS		24. WORKS WELL UNDER PRESSURE
	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS		15. RESPONDS WELL TO SUPERVISION		25. DISPLAYS JUDGEMENT
	6. KNOWS WHEN TO SEEK ASSISTANCE		16. DOES HIS JOB WITHOUT STRONG SUPPORT		26. IS SECURITY CONSCIOUS
	7. CAN GET ALONG WITH PEOPLE		17. COMES UP WITH SOLUTIONS TO PROBLEMS		27. IS VERSATILE
	8. HAS MEMORY FOR FACTS		18. IS OBSERVANT		28. HIS CRITICISM IS CONSTRUCTIVE
	9. SETS THINGS DONE		19. THINKS CLEARLY		29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
	10. CAN COPE WITH EMERGENCIES		20. COMPLETES ASSIGNMENTS WITHIN ALLOCABLE TIME LIMITS		30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section A below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
RI RI AAO		M	SD:DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
RI RI AAO		GS-0132.35-7 Intel Analyst	
7. GRADE	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-7	21 Jan 57	22 January 1956 - 20 January 1957	
10. TYPE OF REPORT (Check one)			
<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT-SUPERVISOR <input type="checkbox"/> REASSIGNMENT-EMPLOYEE <input type="checkbox"/> SPECIAL (Specify)			

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

2. CHECK (X) APPROPRIATE STATEMENTS:

<input type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	<input type="checkbox"/> IF INDIVIDUAL IS RATED "E" IN C1 OR D, A WARNING LETTER HAS BEEN SENT TO HIM & A COPY ATTACHED TO THIS REPORT.
<input checked="" type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	<input type="checkbox"/> I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input checked="" type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

3. THIS DATE	4. SUPERVISOR'S OFFICIAL TITLE
5 Feb 1957	Coordinator 201 Control Unit

5. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

since return from foreign assignment has completed one temporary duty assignment and is preparing for another. He has applied the present headquarters work at the station registry on a standard equating with this evaluation.

Posted Pos. Control 11 FEB 57

Reviewed by RUD 2-7-57

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference is reflected in the above section.

6. THIS DATE	7. TYPED OR OFFICIAL	8. OFFICIAL TITLE OF REVIEWING OFFICIAL
5 Feb 1957		Supervisor, RI/AN Section

SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

- | | |
|---------------------------------|---|
| 5
INSERT
RATING
NUMBER | 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT. |
| | 2. BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES. |
| | 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS. |
| | 4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER. |
| | 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL. |
| | 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR. |

COMMENTS:

SECRET

(When Filled In)

FILE OF PERSONNEL

7. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

- State in the spaces below up to six of the most important SPECIFIC duties performed during the rating period. Place the most important first. Do not include minor or unimportant duties.
- Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.
- For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).
- Compare in your mind, when possible, the individual being rated with others performing same duty at a similar level of responsibility.
- Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA

8. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

DESCRIPTIVE RATINGS NUMBER	1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS
	2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY	7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY
	3 - PERFORMS THIS DUTY ACCEPTABLY	
	4 - PERFORMS THIS DUTY IN A COMPETENT MANNER	
	5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB	

SPECIFIC DUTY NO. 1 Analysis - subjective analysis of CE, FI and PP material.	RATING NUMBER 5	SPECIFIC DUTY NO. 4 Assignment Management - Organization & scheduling of work.	RATING NUMBER 5
SPECIFIC DUTY NO. 2 Analysis - Quantitative	RATING NUMBER 5	SPECIFIC DUTY NO. 5	RATING NUMBER
SPECIFIC DUTY NO. 3 Has and uses area knowledge.	RATING NUMBER 4	SPECIFIC DUTY NO. 6	RATING NUMBER

8. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.

During the short time [redacted] has been assigned to this office, he has very quickly grasped the essentials of his assignment; he knows when to seek guidance and is constantly striving to increase his knowledge and understanding of his assignment. He is extremely conscientious, accepts the responsibilities of his job and performs his duties commendably.

SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.

RATING NUMBER 5	1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED
	2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW
	3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION
	4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION
	5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS
	6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION
	7 - FACILELY BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? ☐ YES ☒ NO. IF YES, EXPLAIN FULLY:

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CF no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
		M	SD&DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
FI RI ALO		OS-0132.35-7 Intel Analyst	
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
OS-7	21 Jan 57	21 January 1956 - 20 January 1957	
10. TYPE OF REPORT. (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
<input checked="" type="checkbox"/> ANNUAL		REASSIGNMENT-EMPLOYEE	

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED			
A. THIS DATE	B. SIGNATURE OF RATER	C. SUPERVISOR'S OFFICIAL TITLE	D. REFERENCE OF OPINION IN ATTACHED MEMO.
5 Feb 1957		Coordinator 201 Control Unit	
2. FOR THE REVIEWING OFFICER		C. OFFICIAL TITLE OF REVIEWING OFFICIAL	
A. THIS DATE	B. SIGNATURE OF REVIEWING OFFICER	Supervisor, RI/Analysis Section	
5 Feb 1957			

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

5 RATING NUMBER	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
	7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☐ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION		
	3	A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS FREQUENT (First line supervisor)		
	2	A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)		
	0	A GROUP, WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)		
	0	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT		
	2	WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION		
	2	WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX		
		OTHER (Specify)		

SECRET

(When Filled In)

OFFICE OF PERSONNEL

9. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION.
Three Months

8. COMMENTS CONCERNING POTENTIAL

[] is lacking in formal education, however, he has intelligence, initiative and ability and with continued on-the-job experience is capable of developing into a good supervisor of a section in RI or in operating the Registry Section of a field installation.

FEB 6 3 08 PM '57

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

Training within the established FI/RI pattern.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
3	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	5	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSING WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	3	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
4	3. HAS INITIATIVE	4	13. ACCEPTS RESPONSIBILITIES	4	23. IS THOUGHTFUL OF OTHERS
4	4. IS ANALYTIC IN HIS THINKING	3	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
4	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	3	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGMENT
3	6. KNOWS WHEN TO SEEK ASSISTANCE	4	16. DOES HIS JOB WITHOUT STRONG SUPPORT	4	26. IS SECURITY CONSCIOUS
5	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	4	27. IS VERSATILE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	4	28. HIS CONDUCT IS CONSISTENT
5	9. GETS THINGS DONE	4	19. THINKS CLEARLY	5	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
5	10. CAN COPE WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	3	30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET

SECRET

FIELD FITNESS REPORT

The Fitness Report is an important factor in organization personnel management. It seeks to provide:

1. The organization selection board with information of value when considering the application of an individual for membership in the career staff; and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

TO THE FIELD ADMINISTRATIVE OR PERSONNEL OFFICER: Consult current field administrative instructions regarding the initiation and transmittal of this report to Headquarters.

TO THE FIELD SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as

revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows where he stands. DATE

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

SECTION I

LEAVE BLANK - FOR HEADQUARTERS USE ONLY

1. DATE OF BIRTH

2. SEX

3. SERVICE DESIGNATION

4. GRADE

5. STATION DESIGNATION (Current)

CS-7

Hqs

6. DUE DATE OF THIS REPORT

April 1956

7. PERIOD COVERED BY THIS REPORT (Inclusive dates)

15 April 1955 - 15 April 1956

SECTION II (To be completed by field supervisor)

1. CURRENT POSITION

Intelligence Analyst - CE

2. DATE ASSUMED RESPONSIBILITY FOR POSITION

25 September 1954

3. STATE THE SPECIFIC ASSIGNMENTS OR TASKS WHICH ARE TYPICAL OF THOSE GIVEN TO THE EMPLOYEE DURING THE PAST THREE TO SIX MONTHS (List in order of frequency)

ity
Subject is an intelligence analyst in the Personal File Section of the Records Integration Branch. Subject is responsible for the maintenance of agent records and personality files, and is responsible for making all file checks.

SECTION III (To be completed at headquarters only)

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

AUTHENTICATION OF REPORT AND SIGNATURES

1. NAME OF RATER (True)	2. NAME OF REVIEWING OFFICIAL IN FIELD (True)
3. THIS REPORT WAS <input checked="" type="checkbox"/> YES <input type="checkbox"/> WAS NOT SHOWN TO THE INDIVIDUAL	
4. DATE REPORT AUTHENTICATED AT Hqs.	5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL OFFICER AT HEADQUARTERS
1 May 1956	CEE/1

DO NOT COMPLETE

FOR HEADQUARTERS USE ONLY

SECRET

SECRET
(When Filled In)

OFFICE OF PERSONNEL

SECTION IV

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply in some degree to most people. On the right hand side of the page are four major categories of descriptions. The table within each category is divided into three small blocks; this is to allow you to make finer distinctions if you so desire. Look at the statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means that you have the definite opinion that the description is not at all suited to the individual.

STATEMENTS	NOT. OR. SERVED	CATEGORIES				
		DOES NOT APPLY	APPLIES TO A LIMITED DEGREE	APPLIES TO A REASONABLE DEGREE	APPLIES TO AN ABOVE AVERAGE DEGREE	APPLIES TO AN OUTSTANDING DEGREE
A. ABLE TO SEE ANOTHER'S POINT OF VIEW.	SAMPLES		X			
B. PRACTICAL.					X	
1. A GOOD REPORTER OF EVENTS.	X					
2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.				X		
3. CAUTIOUS IN ACTION.				X		
4. HAS INITIATIVE.					X	
5. UNEMOTIONAL.				X		
6. ANALYTIC IN HIS THINKING.				X		
7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.				X		
8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.				X		
9. HAS SENSE OF HUMOR.				X		
10. KNOWS WHEN TO SEEK ASSISTANCE.				X		
11. CALM.				X		
12. CAN GET ALONG WITH PEOPLE.				X		
13. MEMORY FOR FACTS.				X		
14. GETS THINGS DONE.					X	
15. KEEPS ORIENTED TOWARD LONG TERM GOALS.					X	
16. CAN COPE WITH EMERGENCIES.					X	
17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.					X	
18. HAS STAMINA; CAN KEEP GOING A LONG TIME.					X	
19. HAS WIDE RANGE OF INFORMATION.				X		
20. SHOWS ORIGINALITY.				X		
21. ACCEPTS RESPONSIBILITIES.					X	
22. ADMITS HIS ERRORS.				X		
23. RESPONDS WELL TO SUPERVISION.				X		
24. EVEN DISPOSITION.				X		
25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT				X		

SECRET

SECRET
(When Filled In)

		(When Filled In)									
26. CAN THINK ON HIS FEET.								X			
27. COMES UP WITH SOLUTIONS TO PROBLEMS.								X			
28. STIMULATING TO ASSOCIATES; A "SPARK PLUG".										X	
29. TOUGH MINDED.								X			
30. OBSERVANT.								X			
31. CAPABLE.								X			
32. CLEAR THINKING.								X			
33. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS.										X	
34. EVALUATES SELF REALISTICALLY.								X			
35. WELL INFORMED ABOUT CURRENT EVENTS.	X										
36. DELIBERATE.								X			
37. EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES.								X			
38. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS.									X		
39. THOUGHTFUL OF OTHERS.										X	
40. WORKS WELL UNDER PRESSURE.								X			
41. DISPLAYS JOUENMENT.								X			
42. GIVES CREDIT WHERE CREDIT IS DUE.										X	
43. HAS DRIVE.										X	
44. IS SECURITY CONSCIOUS.								X			
45. VERSATILE.								X			
46. HIS CRITICISM IS CONSTRUCTIVE.								X			
47. ABLE TO INFLUENCE OTHERS.								X			
48. FACILITATES SMOOTH OPERATION OF HIS OFFICE.								X			
49. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION.										X	
50. A GOOD SUPERVISOR.								X			

SECTION V

2. WHAT ARE HIS OUTSTANDING STRENGTHS?

WHAT ARE HIS OUTSTANDING STRENGTHS?

Subject is conscientious, hard-working and more than willing to work long hours. Subject has a good background and experience in maintaining agent records. Subject has assumed his present responsibilities with a minimum of supervision.

Q. WHAT ARE THE TWO THINGS WE ARE MISSING?

Subject is weak in his ability to express himself in writing.

SECRET

SECRET

(When Filled In)

OFFICE OF PERSONNEL

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OWEING AND ALL OTHER CONSIDERATIONS:
 Subject's stamina and persistence in accomplishing his tasks in a minimum amount of time outweigh his weakness.

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? ☒ NO ☐ YES. IF YES, WHY?

MAIL ROOM

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

Recommend training in Phase II and III

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, & D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- ☐ 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
☐ 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING; HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
☐ 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
☐ 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
☒ 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
☐ 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? ☒ NO ☐ YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the organization.

- ☐ 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE ORGANIZATION; WILL DEFINITELY LEAVE THE ORGANIZATION AT THE FIRST OPPORTUNITY.
☐ 2. HAS STRONG NEGATIVE ATTITUDE TOWARD ORGANIZATION; IRRITATED BY RESTRICTIONS; REGARDS ORGANIZATION AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
☐ 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE ORGANIZATION; BOTHERED BY MINOR FRUSTRATIONS; WILL QUIT IF THESE CONTINUE.
☐ 4. HIS ATTITUDE TOWARD THE ORGANIZATION IS INDIFFERENT; HAS "WAIT AND SEE" ATTITUDE; WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
☒ 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD ORGANIZATION; MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR ORGANIZATION; THINKS IN TERMS OF A CAREER IN THE ORGANIZATION.
☐ 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE ORGANIZATION; BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE ORGANIZATION.
☐ 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE ORGANIZATION; WILL PROBABLY SEARCH FOR A BETTER WORKING AREA, BUT IN THE ORGANIZATION.

D. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities than normally indicated by promotion.

- ☐ 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
☐ 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
☒ 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
☐ 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
☐ 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
☐ 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating; skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- ☐ 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
☐ 2. OF DOUBTFUL SUITABILITY; WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
☐ 3. A BARELY ACCEPTABLE EMPLOYEE; DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
☐ 4. A TYPICAL EMPLOYEE; HE DISPLAYS THE SAME QUALITIES AS MOST OF THE PEOPLE I KNOW IN THE ORGANIZATION.
☒ 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
☐ 6. AN EXCEPTIONALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION.
☐ 7. EQUALLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION.

SECRET

DDP-FF 7-7

SECRET
(When Filled In)

FIELD FITNESS REPORT

COPIED

The Fitness Report is an important factor in organization personnel management. It seeks to provide:

1. The organization selection board with information of value when considering the application of an individual for membership in the career staff, and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

TO THE FIELD ADMINISTRATIVE OR PERSONNEL OFFICER: Consult current field administrative instructions regarding the initiation and transmittal of this report to headquarters.

TO THE FIELD SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as

revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows the standards against which he is

Reviewed by FUD

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

SECTION I

1. QUARTERS USE ONLY

2. SER 3. SERVICE DESIGNATION

M

SD-D

4. GRADE

5. STATION DESIGNATION (Current)

GS-5

Mission Headquarters

6. DUE DATE OF THIS REPORT

7. PERIOD COVERED BY THIS REPORT (Inclusive dates)

1 November 1954 - 14 April 1955

SECTION II (To be completed by field supervisor)

1. CURRENT POSITION

Intelligence Analyst - CE

0136.52

2. DATE ASSUMED RESPONSIBILITY FOR POSITION

25 September 1955

3. STATE THE SPECIFIC ASSIGNMENTS OR TASKS WHICH ARE TYPICAL OF THOSE GIVEN TO THE EMPLOYEE DURING THE PAST THREE TO SIX MONTHS (List in order of frequency)

Subject is an intelligence analyst in the Personality Files Section of the Records Integration Branch. Subject is responsible for the maintenance of agent records and personality files, and is responsible for making all Mission file checks.

SECTION III (To be completed at headquarters only)

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

AUTHENTICATION OF REPORT AND SIGNATURES

1. NAME OF RATER (Type)

2. NAME OF REVIEWER (Type)

3. THIS REPORT WAS NOT SHOWN TO THE INDIVIDUAL BEING RATED.

4. DATE REPORT AUTHENTICATED AT HQS.

29 April 55

5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL OFFICER AT HEADQUARTERS

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

SECRET
(When Filled In)

SECTION IV

OFFICE OF PERSONNEL

This section is provided as an aid in describing the individual. Your description is not responsible or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptions are to be interpreted literally.

On the left hand side of the page below are a series of statements that have to do with people. On the right hand side of the page are four major categories of descriptions. The second category is divided into three small blocks; this is to allow you to make finer distinctions if you so wish. One of the statements on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means you have the definite opinion that the description is not at all suited to the individual.

STATEMENTS		CATEGORIES					
		NOT OBSERVED	DOES NOT APPLY	APPLIES TO A LIMITED DEGREE	APPLIES TO A REASONABLE DEGREE	APPLIES TO AN ABOVE AVERAGE DEGREE	APPLIES TO AN OUTSTANDING DEGREE
A. ABLE TO SEE ANOTHER'S POINT OF VIEW.	SAMPLES			X			
B. PRACTICAL.						X	
1. A GOOD REPORTER OF EVENTS.				X			
2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.					X		
3. CAUTIOUS IN ACTION.						X	
4. HAS INITIATIVE.							X
5. UNEMOTIONAL.						X	
6. ANALYTIC IN HIS THINKING.						X	
7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.						X	
8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.						X	
9. HAS SENSE OF HUMOR.						X	
10. KNOWS WHEN TO SEEK ASSISTANCE.						X	
11. CALM.						X	
12. CAN GET ALONG WITH PEOPLE.						X	
13. MEMORY FOR FACTS.						X	
14. GETS THINGS DONE.							X
15. KEEPS ORIENTED TOWARD LONG TERM GOALS.						X	
16. CAN COPE WITH EMERGENCIES.						X	
17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.							X
18. HAS STAMINA; CAN KEEP GOING A LONG TIME.							X
19. HAS WIDE RANGE OF INFORMATION.						X	
20. SHOWS ORIGINALITY.						X	
21. ACCEPTS RESPONSIBILITIES.						X	
22. ADMITS HIS ERRORS.						X	
23. RESPONDS WELL TO SUPERVISION.						X	
24. EVEN DISPOSITION.						X	
25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT.						X	

SECRET

SECRET
(When Filled In)

26. CAN THINK ON HIS FEET.						X													
27. COMES UP WITH SOLUTIONS TO PROBLEMS.						X													
28. STIMULATING TO ASSOCIATES: A "SPARK PLUG".										X									
29. TOUGH MINDED.						X													
30. OBSERVANT.						X													
31. CAPABLE.						X													
32. CLEAR THINKING.						X													
33. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS.										X									
34. EVALUATES SELF REALISTICALLY.						X													
35. WELL INFORMED ABOUT CURRENT EVENTS.				X															
36. DELIBERATE.						X													
37. EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES.						X													
38. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS.										X									
39. THOUGHTFUL OF OTHERS.						X													
40. WORKS WELL UNDER PRESSURE.										X									
41. DISPLAYS JUDGEMENT.						X													
42. GIVES CREDIT WHERE CREDIT IS DUE.						X													
43. HAS DRIVE.										X									
44. IS SECURITY CONSCIOUS.										X									
45. VERSATILE.						X													
46. HIS CRITICISM IS CONSTRUCTIVE.						X													
47. ABLE TO INFLUENCE OTHERS.						X													
48. FACILITATES SMOOTH OPERATION OF HIS OFFICE.						X													
49. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION.										X									
50. A GOOD SUPERVISOR.						X													

SECTION V

A. WHAT ARE HIS OUTSTANDING STRENGTHS?

Subject is conscientious, hard-working, and more than willing to work long hours. He has a good background and experience in maintaining agent records. Subject has assumed his present responsibilities with a minimum of supervision.

B. WHAT ARE HIS OUTSTANDING WEAKNESSES?

Subject is weak in his ability to express himself in writing.

SECRET

SECRET
(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGNS ALL OTHER CONSIDERATIONS:

Subject's stamina and persistence in accomplishing his tasks in **81st AIRBORNE**
amount of time outweigh his weaknesses.

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? ☒ NO ☐ YES. IF YES, WHY?

May 16 8 43 AM '55

MAIL ROOM

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

Recommend training in Phase II and III

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, & D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- ☐ 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
- ☐ 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- ☐ 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- ☐ 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- ☒ 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- ☐ 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? ☒ NO ☐ YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said; his actions, and any other indications, give your opinion of this person's attitude toward the organization.

- ☐ 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE ORGANIZATION... WILL DEFINITELY LEAVE THE ORGANIZATION AT THE FIRST OPPORTUNITY.
- ☐ 2. HAS STRONG NEGATIVE ATTITUDE TOWARD ORGANIZATION... FRANK BY RESTRICTIONS... REGARDS ORGANIZATION AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- ☐ 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE ORGANIZATION... BOTHERED BY MINOR FRUSTRATIONS... WILL QUIT IF THESE CONTINUE.
- ☐ 4. HIS ATTITUDE TOWARD THE ORGANIZATION IS INDIFFERENT... HAS "WAIT AND SEE" ATTITUDE... WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- ☐ 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD ORGANIZATION... MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR ORGANIZATION... THINKS IN TERMS OF A CAREER IN THE ORGANIZATION.
- ☒ 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE ORGANIZATION... BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE ORGANIZATION.
- ☐ 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE ORGANIZATION... WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE ORGANIZATION.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

- ☐ 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- ☐ 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- ☐ 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- ☐ 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- ☒ 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- ☐ 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating... skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- ☐ 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- ☐ 2. OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- ☐ 3. A BARELY ACCEPTABLE EMPLOYEE... DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- ☐ 4. A TYPICAL EMPLOYEE... HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE ORGANIZATION.
- ☒ 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- ☐ 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION.
- ☐ 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION.

SECRET

SECRET
SECURITY INFORMATION

<p style="font-size: 1.2em; margin: 0;">FE 9 JWC/DV</p>		<p align="right">DATE <i>28 June 54</i></p>									
PERSONNEL EVALUATION REPORT											
<i>Items 1 through 6 will be completed by Administrative or Personnel Officer</i>											
1. NAME (Last)	(First)	(Middle)	2. GRADE								
			GS-5								
3. POSITION TITLE		Intel. Anal. CD-FI									
4. OFFICE	STAFF OR DIVISION	BRANCH	DEPT'L. <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>								
DDP/FI/RI	P & R Branch	Consol Section									
5. PERIOD COVERED BY REPORT		6. TYPE OF REPORT									
From 21 Apr. 53 To 20 Apr. 54		<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Special <input type="checkbox"/> Reassignment <input type="checkbox"/> Reassignment of Supervisor									
<i>Items 7 through 10 will be completed by the person evaluated</i>											
7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES. As senior analyst on the EE/FI/G/Z area my duties consist of: (A) Consolidating personality files which entails the following: (1) Make a complete search in Index on all references pertaining to the subject, (2) gathering all references in RI/Files, (3) analyzing documents for inclusion in ZOI, (4) preparing a summary of reference sheet which notes the disposition of all the documents put in the case. (B) Liaison with the area desk. (C) Supervising the work of the junior analyst.											
8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD. <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">Name of Course</th> <th style="width:30%;">Location</th> <th style="width:20%;">Length of Course</th> <th style="width:20%;">Date Completed</th> </tr> </thead> <tbody> <tr> <td align="center" colspan="4" style="height: 40px;">NONE</td> </tr> </tbody> </table>				Name of Course	Location	Length of Course	Date Completed	NONE			
Name of Course	Location	Length of Course	Date Completed								
NONE											
9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED? Intelligence work at the desk level. IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS). Two years experience in RI.											
10. <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border-bottom: 1px solid black; width: 40%;">12 April 1954</div> <div style="border: 1px solid black; width: 50%; height: 30px;"></div> </div> <p align="center" style="font-size: 0.8em; margin-top: 5px;">DATE</p>											
<i>Items 11 through 13 will be completed by Supervisor</i>											
11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE. <div style="border: 1px solid black; width: 150px; height: 15px; margin-bottom: 5px;"></div> has performed his duties conscientiously and well. He possesses a great deal of energy, is extremely industrious and has maintained excellent relations in his liaison with the area desk.											

SECRET
SECURITY INFORMATION

OFFICE OF PERSONNEL

12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING?	
<div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div> has performed his duties most outstandingly by virtue of his formation and maintenance of excellent liaison relations.	
13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT?	
14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE.	
<div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div> has handled his present responsibilities admirably and I am certain he would be capable of handling additional ones as the opportunity occurs.	
15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.)	
<div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div> could qualify as an Intelligence Analyst in any of the appropriate section of RI.	
16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON?	
None at this time	
17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.	
18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.	
13 April 54 DATE	<div style="border: 1px solid black; width: 200px; height: 60px;"></div>
18 May 1954 DATE	
19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown)	
20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)	
Subject transferred to FE effective 25 April 1954. <i>over</i>	

SECRET

SECRET
SECURITY INFORMATION

PERSONNEL EVALUATION REPORT

Items 1 through 6 will be completed by Administrative or Personnel Offices

1. NAME 		2. GRADE GS-4	3. POSITION TITLE File Clerk	
4. OFFICE DD/P	STAFF OR DIVISION FI	BRANCH FI	<input checked="" type="checkbox"/> DEPT'L. <input type="checkbox"/> FIELD	IF FIELD, SPECIFY STATION
5. PERIOD COVERED BY REPORT from 4-21-52 to 4-21-53		6. TYPE OF REPORT <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Special <input type="checkbox"/> Reassignment <input type="checkbox"/> Reassignment of Supervisor		

Items 7 through 10 will be completed by the person evaluated

7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.

Review and analyze material for consolidation of FOI Personality Files. This includes making a complete impartial name check in RI/SC index and a complete search for all material pertinent to the subject in the RI/Files. Also maintain liaison with the PROSEC.

After reviewing documents, make up Cross References and any Document changes as necessary. Complete a Summary of References Form listing all references reviewed and the action taken on each.

8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.

Name of Course	Location	Length of Course	Date Completed
None			

9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED?

Accounting.

IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS).

Two years of Accounting and law school.

10.

7 April 1953

DATE SIGNATURE

Items 11 through 12 will be completed by Supervisor

11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.

 performance in this section has been very satisfactory. While still in a trainee position, he is learning the procedure of this section very well. He is extremely industrious and shows little inclination to waste time.

SECRET
SECURITY INFORMATION

<p>12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING?</p> <p> has been most outstanding by virtue of his industry.</p>
<p>13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT?</p>
<p>14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE.</p> <p> has had little opportunity to show his ability, in this line, so far.</p>
<p>15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.)</p> <p>Due to his position as trainee, other duties cannot be considered, but I feel that he is quite capable of filling any number of jobs in RI.</p>
<p>16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON?</p> <p>None at this time.</p>
<p>17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.</p>
<p>18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.</p>
<div style="display: flex; justify-content: space-between;"><div style="width: 40%;"><p><u>20 April 1953</u></p><p style="text-align: center;">DATE</p></div><div style="width: 55%; border: 1px solid black; height: 80px;"></div></div>
<p>19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in</p> <div style="display: flex; justify-content: space-between;"><div style="width: 40%;"><p><u>20 April 1953</u></p><p style="text-align: center;">DATE</p></div><div style="width: 55%; border: 1px solid black; height: 80px;"></div></div>
<p>20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)</p>

SECRET

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE**
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

1

FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

2

FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last)	(first)	(middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER
<input type="text"/>			<input type="text"/>	<input type="text"/>
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)	
<input type="text"/>			<input type="text"/>	

3

MARK AN "X" IN ONE OF THE BOXES BELOW. (do NOT mark more than one):

Mark here
if you
WANT BOTH
optional and
regular
insurance

☐
(A)

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here
if you
DO NOT WANT
OPTIONAL but
do want
regular
insurance

☒
(B)

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here
if you
WANT NEITHER
regular nor
optional
insurance

☐
(C)

WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

4

**SIGN AND DATE. IF YOU MARKED BOX "A" OR "C",
COMPLETE THE "STATISTICAL STUB," THEN RETURN
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE:**

SIG	<input type="text"/>
DATE	4 MAR 1968

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

RECEIVED
OFFICE OF PERSONNEL
MAR 20 1 47 PM '68

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM No. 176-7
JANUARY 1958
(For use only until April 16 1968)
176-101

C-O-N-F-I-D-E-N-T-I-A-L
(when filled in)

TRAINING REPORT

PERFORMANCE EVALUATION WORKSHOP

Student: Dates: 23-24 February 1978
Employee No: Office: ISS
Service Designation: p

COURSE OBJECTIVES

At the conclusion of this Workshop, students should:

1. Be familiar with the principal parts of the Agency's Personnel Evaluation Program;
2. Understand their roles as supervisors in the Performance Evaluation part of the overall Program;
3. Be better prepared to deal with some of the more troublesome problems encountered in performance evaluation;
4. Know how to prepare more useful Fitness Reports and conduct more effective FR interviews;
5. Understand how the Letter of Instruction relates to the performance evaluation process.

ACHIEVEMENT RECORD

This is a certificate of attendance only. No attempt was made to evaluate student achievement in the workshop.

FOR THE DIRECTOR OF TR

Instructor

MAR 1978

Date

C-O-N-F-I-D-E-N-T-I-A-L
(when filled in)

CERTIFICATION OF SEPARATING EMPLOYEE

NAME (Last-First-Middle)

Hubert, James S.

MEMORANDUM FOR THE RECORD - ATTACH TO OFFICIAL PERSONNEL FOLDER

I hereby acknowledge the receipt of the following forms and/or information concerning separation from CIA as indicated by check mark:

- | | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | 1. Standard Form 8 (Notice to Federal Employee about Unemployment Compensation). |
| <input checked="" type="checkbox"/> | 2. Standard Form 55 (Notice of Conversion Privilege, Federal Employees' Group Life Insurance). |
| <input checked="" type="checkbox"/> | 3. Standard Form 55 (Agency Certification of Insurance Status, Federal Employees' Group Life Insurance Act of 1954). |
| <input checked="" type="checkbox"/> | 4. Standard Form 2302 (Application for Refund of Retirement Deductions). |
| <input checked="" type="checkbox"/> | 5. Form 2595 (Authorization for Disposition of Paychecks).
<i>Continued to back</i> |
| <input checked="" type="checkbox"/> | 6. <u>Only applicable to Retirees - Returnees</u> (resignees from overseas assignment)
I have been advised of my right to have a medical examination before my separation from this Agency and of the importance of such a medical check to my health and well-being. |
| <input checked="" type="checkbox"/> | 7. CSC Pamphlet 51 (Re-employment Rights of Federal Employees Performing Armed Forces Duty). |
| <input checked="" type="checkbox"/> | 8. Instructions for returning to duty from Extended Leave or Active Military Service. |

Date Signed

Correspondence

OPTIONAL FORM NO. 10



Overt



Conf

C-O-N-F-I-D-E-N-T-I-A-L
(when filled in)

TRAINING REPORT

PERFORMANCE EVALUATION WORKSHOP

Student: Dates: 23-24 February 1978
Employee No: Office: ISS
Service Designation: D

COURSE OBJECTIVES

At the conclusion of this Workshop, students should:

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2. Understand their roles as supervisors in the Performance Evaluation part of the overall Program;
3. Be better prepared to deal with some of the more troublesome problems encountered in performance evaluation;
4. Know how to prepare more useful Fitness Reports and conduct more effective PR interviews;
5. Understand how the Letter of Instruction relates to the performance evaluation process.

ACHIEVEMENT RECORD

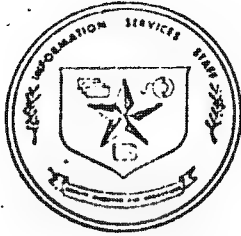
This is a certificate of attendance only. No attempt was made to evaluate student achievement in the workshop.

FOR THE DIRECTOR OF TRA

1978
Instructor Date

C-O-N-F-I-D-E-N-T-I-A-L
(when filled in)

ADMINISTRATIVE - INTERNAL USE ONLY



3 February 1977

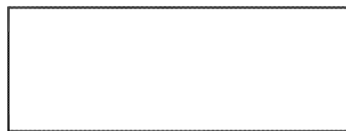
MEMORANDUM FOR THE RECORD

FROM : ISS/Training Staff

SUBJECT: Document Analysis II for Records Management Officers

1. [redacted] OPF has satisfactorily completed the Document Analysis II Course given for Division and Staff Records Management Officers by ISS Training Officer, [redacted]. Classes were held daily from 0900 to 1230 hours from 29 November through 10 December 1976.

2. The topics covered in the course were records principles and processing procedures used by Data Management Section analysts for initial input of correspondence into the DDO Records System. The students also covered the official files system and indexing criteria as they currently exist and discussed some of the drawbacks and possible systems changes we might expect in the next few years. Periodic exercises were given to test the students comprehension of topics discussed.



ADMINISTRATIVE - INTERNAL USE ONLY

20 JUL 1976

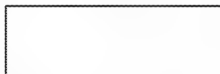
I, the undersigned, authorize the Office of Personnel
to give to CartBlanche whatever information is necessary
for me to obtain a credit card.



*ma
7-21-76*

CERTIFICATE OF TRAINING

THIS IS TO CERTIFY THAT



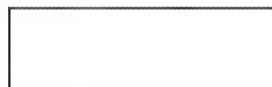
SUCCESSFULLY COMPLETED

SUPERVISORY COUNSELING WORKSHOP

ON

26 - 27 AUGUST 1976

INFORMATION SERVICES GROUP



CHIEF, ISG TRAINING

TRAINING REPORT
OFFICE OF TRAINING

This certifies that [] has
successfully completed the Introduction to Micrographics Seminar #2
which was conducted from 24 July to 25 July 1974.

This seminar provides basic information on microphotography
and explores the application of this technology in controlling
overburdened and sometimes inefficient paperwork systems. Specific
blocks of instruction include: Image Recording Techniques,
Microfilm Formats, Viewers and Viewer-Printers, Indexing Methods,
Computer Output Microfilm (COM), Micropublishing, and Development
and Implementation of Agency Applications. Participants receive
a portfolio of various samples of microforms, a Glossary of
Micrographic Terms, and a Primer on Information Science.

FOR THE DIRECTOR OF TRAINING:

[]
Course Coordinator

Final Grade Report

- Grading System:**
 A - Superior Scholarship
 B - Good Scholarship
 C - Average Scholarship
 D - Passing Scholarship
 F(a) - Failure Academic
 F(n) - Failure Non-Attendance
 I - Incomplete
 WX - Withdrawal during first half of term
 WF - Withdrawal during second half of term
 WF - Withdrawal during second half of term
 X - Emergency withdrawal official withdrawal

UNIVERSITY OF MARYLAND EUROPEAN DIVISION - UNIVERSITY COLLEGE OFFICE OF THE REGISTRAR

Report of

Student
Copy

Term 1, Acad. Yr. 1971/72 at Rome

Center

COURSE	Section/Hours	GRADE
ITAL 111	3	B

Signature of Instructor: DeSantis

* If Incomplete is to be assigned, student must have attended three-fourths of class meetings. Indicate below remaining work, e.g. final exam, term paper, reports, etc.

Grade to Date _____ Deadline date for completion, if established _____

The student is responsible for arranging with the instructor for completion of these requirements.

UMR 11 (5/6/72) (4) - 67

Final Grade Report

- Grading System:**
 A - Superior Scholarship
 B - Good Scholarship
 C - Average Scholarship
 D - Passing Scholarship
 F(a) - Failure Academic
 F(n) - Failure Non-Attendance
 I - Incomplete
 WX - Withdrawal during first half of term
 WF - Withdrawal during second half of term
 WF - Withdrawal during second half of term
 X - Emergency withdrawal official withdrawal

UNIVERSITY OF MARYLAND EUROPEAN DIVISION - UNIVERSITY COLLEGE OFFICE OF THE REGISTRAR

Report of

Student
Copy

Term 2, Acad. Yr. 1971/72 at Rome

Center

COURSE	Section/Hours	GRADE
ITAL 112	3	B

Signature of Instructor: DeSantis

* If Incomplete is to be assigned, student must have attended three-fourths of class meetings. Indicate below remaining work, e.g. final exam, term paper, reports, etc.

Grade to Date _____ Deadline date for completion, if established _____

The student is responsible for arranging with the instructor for completion of these requirements.

UMR 11 (5/6/72) (4) - 67

Page 6 of 6
(When Completed)

TRAINING REPORT

Americana Foreign Orientation -

16 Hours

20-21 March 1951

6 Students

Student: [redacted]

Year of Entry 1950

Officer: April 1952

Grade: GS-9

Office: 71

COURSE SUMMARY - CONTINUED FROM PAGE 5

The course was held in the general area of country of destination. Included was a briefing on "the Americana abroad problem," its implications for the individual employee or dependent and the Agency, practical advice for successful personal adjustment to foreign customs, habits and life in the area of assignment, useful information on the area, and guide lines for understanding its people and problems. Advice included ways for effective interpersonal relations in the particular country or region. Area information includes an analysis of the importance of the mission to the United States and descriptions of the people, the institutions, and current living conditions. The course offers lectures, panel discussions, films, slides and stories, and selected area maps for a recommended program of self-study. Emphasis is on understanding the area and its people, and on the importance of the mission to the United States.

This is a certificate of attendance. It is not a record of the course. It is not a record of the student's performance in the course.

DATE OF COMPLETION: 20 April 1951

20 April 1951

/s/ [redacted]

1. INSTRUCTIONS
(When Completed)

2. INSTRUCTIONS

16 Form Good Orientation 20-21 March 1961

6

Name: [Redacted] Address: [Redacted]
Student: [Redacted] Year of Birth: [Redacted]
Grades: [Redacted] Office: [Redacted]

1. INSTRUCTIONS

The purpose of this course is to provide students with information for orientation of travel in the general area and country of destination. Included are a briefing on "The Americans Abroad Problem," its implications for the individual employee or diplomat and the Agency, practical advice for successful personal adjustment to everyday problems of working and living in the area of assignment, useful information on the area, and prime lines for understanding the major problems. Advice includes cues for effective interpersonal relations in the particular country or area. Area information includes an analysis of the framework of the region to the United States and description of the people, the institutions, and current major problems. The course offers lectures, panel discussions, films, slide presentations, and selected readings for the general background of the area. Students are encouraged to participate in the course and to provide feedback.

This is a course of orientation for the purpose of providing information to the students of the course.

26 April 1961

/s/

[Redacted Signature]

3-E-C-R-E-T

WRITING WORKSHOP (INTERMEDIATE) NO. 2

TRAINING EVALUATION

SECTION I: IDENTIFYING INFORMATION			
NAME <input type="text"/>	SEX M	DATES OF COURSE 26 October - 19 November 1959	NO. OF STUDENTS 17
DATE OF BIRTH <input type="text"/>	EOB DATE April 1952	GRADE OR RANK GS-9	OFFICE FE/Administration
PROJECTED ASSIGNMENT OR PRESENT POSITION Records Officer			
SECTION II: OBJECTIVE OF THE COURSE			
To stimulate habits of thoughtful, self-critical writing for intelligence production.			

SECTION III: TECHNICAL CHARACTERIZATION OF THE COURSE

The class is conducted for 10 to 15 students. It meets for nine hours per week, morning sessions over a period of four weeks. There are three sessions during the first week and two thereafter for three weeks. The course is run on the "learn by practice" system. A number of writing tests are given in class, and they are evaluated against national and Agency norms. The trainees also prepare written exercises and have an opportunity to rewrite some of them during later sessions. Students may use the form and substance of their own office's written product. Special attention is paid to logical organization, diction, sentence structure and other mechanics of writing. The trainees receive detailed comments on their papers and are encouraged to discuss special writing problems with the staff.

SECTION IV: HOW THE STUDENTS ARE EVALUATED

Staff members observe the student's writing ability, any change demonstrated, and application to the course material. The evaluation represents their agreed comments based on the student's total performance.

3-E-C-R-E-T

S-E-C-R-E-T

SECTION V: REPORT OF STUDENT ACHIEVEMENT

[] added to the good improvement in mechanics of expression he had achieved in the Basic Writing Workshop. He has now developed the ability to write smooth, compact, and readable sentences. He also learned to organize topics more effectively, and with further writing experience, he can develop the ability to write analytical papers of a professional caliber.

[]
Chief Instructor

S-E-C-R-E-T

S-E-C-R-E-T

WRITING WORKSHOP (BASIC) NO. 2

TRAINING EVALUATION

SECTION I: IDENTIFYING INFORMATION			
NAME <input type="text"/>	SEX M	DATES OF COURSE 21 Sept. - 15 Oct. 1959	NO. OF STUDENTS 13
DATE OF BIRTH <input type="text"/>	EOD DATE April 1952	GRADE OR RANK GS-9	OFFICE FR/Administration
PROJECTED ASSIGNMENT OR PRESENT POSITION Records Officer			
SECTION II: OBJECTIVE OF THE COURSE			
To stimulate habits of thoughtful, self-critical writing for intelligence production.			

SECTION III: SPECIFIC CHARACTERISTICS OF THE COURSE

The class is conducted for ten to fifteen students. It meets for about three-hour morning sessions over a period of four weeks. There are three sessions during the first week and two thereafter for three weeks. The course is run on the "learn by practice" system. A number of writing tests are given in class, and they are evaluated against national and Agency norms. The trainees also prepare written exercises and have an opportunity to rewrite some of them during later sessions. Students may use the form and substance of their own office's written product. Special attention is paid to logical organization, diction, sentence structure and other mechanics of writing. The trainees receive detailed comments on their papers and are encouraged to discuss special writing problems with the staff.

SECTION IV: HOW THE STUDENTS ARE EVALUATED

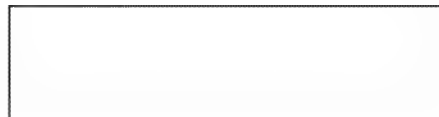
Staff members observe the student's writing ability, any change demonstrated, and application to the course material. The evaluation represents their agreed comments based on the student's total performance.

S-E-C-R-E-T

3-6-C-R-5-7

SECTION V: REPORT OF STUDENT ACHIEVEMENT

[] considerably improved the clarity of his writing during the course, by reducing sentence errors and roundabout phrasing. His written papers reflected his gains in knowledge of basic rules of English usage. His achievement in the Writing Workshop (Basic) shows that [] can develop good writing skills, and that he and the Agency would benefit if he took the Writing Workshop (Intermediate).



3-6-C-R-5-7

S-1-C-P-E-1

TRAINING EVALUATION

ADMINISTRATIVE SUPPORT COURSE # 2

SECTION I: IDENTIFYING INFORMATION			
NAME	SEX	DATES OF COURSE	NO. OF STUDENTS
	M	10 - 28 May 1954	1st week-49 2nd & 3rd weeks-44
DATE	FOR DATE	GRADE OR RANK	OFFICE
	21 April 1952	GS-5	FE/PI
PROJECT ASSIGNMENT OR PRESENT POSITION			
Registry Analyst			
SECTION II: OBJECTIVES			
The objectives of this course are to provide the student with (1) an understanding of the inter-relationships between operating functions and administrative support functions; (2) an understanding of some of the basic principles and techniques of Agency operations and the organization and functions of the various clandestine components; (3) a knowledge of procedures, regulations, and problems peculiar to Logistics, Finance, and other areas of administrative support.			
SECTION III: SPECIFIC CHARACTERISTICS OF THE COURSE			
One week of the course is devoted to lectures in the area described in category 1 on reverse of this page. The material in categories 2 and 3 is presented both by lecture and by practical exercises during the remaining two weeks of the course. Categories 4 through 9 are concerned with the application of knowledge of Agency organization, structure, procedures and regulations in practical situations.			
SECTION IV: STUDENT PERFORMANCE			
The instructor has had many students in this course and has observed their performance in this student's section. The student's performance in this course was no different from other students in the course with no allowance made for differences in age, education, experience, etc. These ratings are defined as follows:			
<p>EXCELLENT: The student indicated exceptional ability or proficiency in meeting this goal or objective; he demonstrated an unusually thorough knowledge of the material presented.</p> <p>SATISFACTORY: The student met this objective in a competent and effective manner; he demonstrated a good grasp and understanding of the material presented.</p> <p>UNSATISFACTORY: The student did not achieve this goal or objective; the student's performance indicated a serious lack of knowledge concerning material presented.</p>			
S-1-C-P-E-1			

- 3-E-6-1-1

MAJOR CATEGORIES	ORAL	WRIT	EXPERIENT
1. Orientation in basic principles of clandestine activity.	2	30	17
2. Knowledge of clandestine services command structure and organization.	5	14	25
3. Knowledge of Agency and clandestine services regulations and administrative procedures.	2	28	14
4. (A) Preparation of advance form; travel voucher (DOMESTIC) and entertainment reimbursement (DOMESTIC).	0	17	1
(B) Preparation of travel voucher (FOREIGN) including computation of per diem and currency conversion.	1	15	28
5. Preparation of Station Finance Reports.	3	5	6
6. Preparation of forms used in a detached station for property records; knowledge of responsibility for property at the station.	2	20	22
7. Preparation of form required for project presentation to the Project Review Committee.	1	30	13
8. Preparation of cable form used at Headquarters writing message from material given, with use of accepted digits, punctuation, and abbreviations.	1	33	4
9. Preparation of Headquarters and Field dispatch form and Field pouch manifest.	0	31	10

SECTION VI. COMMENTS

Comments, especially on habits and characteristics, with particular reference to strong or weak points of the individual or anything that might have influenced his performance in the course.

FOR THE DIRECTOR OF TRAINING:



3-E-6-1-1

S E C R E T

TRAINING EVALUATION

SECTION I: IDENTIFYING INFORMATION						
Name [Redacted]	Sex M	Course and Beginning Date PHASE I - ORIENTATION #9 - 19 April 54				
Date of Birth [Redacted]	E O D April 1952	Grade or Rank GS-5	Office FE/ET			
Projected Assignment or Present Position Registry Analyst						
<p>This evaluation is based on a course of 120 hours given over a period of 3 weeks in which there were 89 students. The length of the course, number of students, nature of the course, skills and knowledge taught, and the opportunity for observing the individual student determine which sections of this report are used. These facts must also be considered in interpreting the evaluations which, therefore, should not be used as the sole basis for personnel decisions. THIS REPORT IS INTENDED PRIMARILY TO FURNISH INFORMATION AS TO HOW WELL THE STUDENT LEARNED THE SUBJECT MATTER OR SKILLS TAUGHT. In addition, observations of interest and importance are reported which can have significance only as they are related to other information. Unless otherwise stated, performance is evaluated in terms of standards set by instructors or in relation to the performance of others who have taken the course. For further information, consult the Training Evaluation Branch, Assessment and Evaluation Staff, Office of Training.</p>						
SECTION II: KNOWLEDGE						
Subject	Hrs	Rating				
		Fail	Poor	Sat	Exc	Sup
Introduction to Intelligence	80	5	12	26*	34	12
Communism and the U S S R	40	5	17	35*	31	7
<p>The numbers show how many students received each rating. An asterisk (*) shows the rating this student received.</p>						
SECTION III: SKILLS						
<p>The 'Course Instruction' column contains scores and/or ratings given by the instructional staff for skills which are specifically intended to be outcomes of the course. The 'Observation' column contains ratings by instructors and/or students concerning skills which have been observed for every student in a class but which have not been the subject of intensive instruction or practice.</p>						
Skill	Hrs.	Course Instruction		Observation		
		Objective Score	Rating or Evaluation	Av. Rating by Instructors	Av. Rating by Students	

SECTION IV: OBSERVATIONS of ATTITUDES or OTHER PERSONAL CHARACTERISTICS					
<i>During the course incidents were observed which suggested that this person:</i>					
Had difficulty in getting along with others.	Yes	No	Lacked motivation for an Agency career.	Yes	No
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Lacked sufficient security-mindedness.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Interfered with instructional and classroom activities.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Lacked interest in the course.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explanations of any 'Yes' answers to items above. Frequency of occurrence and number of persons observing these attitudes or characteristics are included.					
SECTION V: COMMENTS					
Comments, especially on habits or characteristics, with particular reference to strong and weak points of the individual, or anything that may have influenced his performance in the course are reported here.					
<div style="border: 1px solid black; width: 150px; height: 25px; margin: 0 auto;"></div> Chief-Instructor					
SECTION VI: ADJUSTED OVER-ALL EVALUATION					
FOR OPTIONAL USE BY INSTRUCTORS In terms of all factors observed during the course and taking into account this student's experience in the Agency, grade, and general area of work, an 'X' in one of boxes shows the instructor's judgment of his performance in the course.			FOR OPTIONAL USE BY TRAINING OFFICERS This evaluation, shown by an 'X' in one of the boxes, takes into account this training record, the student's age, grade, age in experience, and projected assignment. It is included for the purpose of giving supervisors an estimate of the implications of the training evaluation report for the student's assignment and career potential.		
He was inadequate in his performance.	<input type="checkbox"/>		<input type="checkbox"/> This is an inadequate performance.		
He was barely adequate in his performance and performed acceptably only in a limited range of assignments.	<input type="checkbox"/>		<input type="checkbox"/> This is a barely adequate performance and raises questions concerning his suitability for his assignment.		
He performed acceptably, but was barely adequate in some respects.	<input type="checkbox"/>		<input type="checkbox"/> This is an acceptable performance but discloses possible areas of weakness.		
He was a typically effective student who performed in a competent, dependable manner.	<input type="checkbox"/>		<input checked="" type="checkbox"/> This is a satisfactory performance revealing a typically competent person.		
He performed at a high level of competence.	<input type="checkbox"/>		<input type="checkbox"/> This performance reveals a high level of competence.		
He performed at an extremely high level that only a few students have surpassed.	<input type="checkbox"/>		<input type="checkbox"/> This is an extremely competent performance that only a few persons of his background and position have surpassed.		
Training Officer's Comments					
<div style="border: 1px solid black; width: 150px; height: 25px; margin: 0 auto;"></div> Training Officer					

SECRET

15 A

MEMORANDUM FOR: Chairman, Clandestine Service Personnel Staff

SUBJECT: [] - Recommendation for Promotion

1. Subject has been in grade GS-10 since June 1968. Based on his outstanding performance as Chief of Registry in [] Station since June 30, 1971, he strongly merits promotion to grade GS-11 at this time. When Subject took over the responsibility for Registry a year ago, he found a system glutted with paper and bound up by a policy which discouraged getting rid of it. He found many procedures in force which were out of date, if not obsolete, and proposed streamlined procedures, which were adopted, to replace them. He asked for and was given the responsibility to analyze and distribute the cables, which had previously been a function of the Chief of Station's secretary. He recommended the discontinuance of the abstract system, which proposal had been adopted by most elements of the Station. He recommended a reduction in the retention period for cable and dispatch chronos. With the help of a TDY team here for the first half of CY 1972, he devised and instituted a program of purging the files. This program has resulted in the disposition of most of the departed Soviet files, a severe trimming of the true name files, and the review, reduction and up-dating of the project and operational files. All of this work was accompanied by appropriate name checks, entries on the index cards and selection of pertinent documents for transmittal to Headquarters. In summary, Subject performed a thorough "house-cleaning" of Station records in the full meaning of that phrase. This program is by no means finished. In fact, Subject has plans for continuing efforts along these lines which may exceed his tenure at this Station since he intends to return to Headquarters not later than May 1974. The on-going program includes a review and reorganization of the subject files, the encrypted 201's and the disposition (hopefully) of about 50 feet of microfilm. A corollary to these projects will be a significant reduction in the index cards, which at present lead to the microfilm and to other superfluous material we either have or will destroy.

2. The equally important aspect of records management, namely the introduction of procedures to lessen the likelihood

WARNING NOTICE
SENSITIVE INTELLIGENCE SOURCES
AND METHODS INVOLVED

SECRET

CLASSIFIED BY	[]
EACH ITEM OF INFORMATION DECLASSIFICATION	
SCHEDULED FOR REVIEW ON []	
EXEMPTED FROM DECLASSIFICATION (if so, state category)	
[]	
EXEMPTED FROM DECLASSIFICATION ON	
[]	
PP-212	
(unless impossible, insert date or event)	

SECRET

-2-

if not prevent the reoccurrence of this pile-up of paper is not lost on this officer. He constantly thinks in terms of procedures and controls to accomplish this end.

3. Subject is dedicated, highly motivated, conscientious, and hard working. He reports to work each day an hour before the Station opens in order to distribute the cables by opening of business. He never hesitates to respond positively to any request for help. Indeed, he solicits work which he believes can be done more easily or more simply in his unit. In all respects, Subject is a trained, professional records management officer who is thoughtful as well as enthusiastic about his work.

4. It is strongly recommended that Subject be promoted to grade GS-11.

Archibald B. Roosevelt

Archibald B. Roosevelt, Jr.
Chief, European Division

SECRET

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(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION SHOWN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HRR 25-7, PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME	
1. MARITAL STATUS (Check one)	
<input type="checkbox"/> SINGLE	<input checked="" type="checkbox"/> MARRIED
<input type="checkbox"/> SEPARATED	<input type="checkbox"/> DIVORCED
<input type="checkbox"/> WIDOWED	<input type="checkbox"/> ANNULLED
IF MARRIED, PLACE OF MARRIAGE Washington, D.C.	
DATE OF MARRIAGE 6 Aug 60	
IF DIVORCED, PLACE OF DIVORCE DECREE	
DATE OF DECREE	

2. MEMBERS OF FAMILY	
TELEPHONE NO. 24-0163	
DATE OF BIRTH 15	
220/2/71	
27 PM '71	
NAME OF FATHER (or male guardian)	
ADDRESS	
TELEPHONE NO.	

NAME	
DATE OF BIRTH	
RELATIONSHIP	

IS THE INDIVIDUAL NAMED ABOVE A MEMBER OF YOUR AGENCY'S AFFILIATION? (If NO, MARK FROM WHO YOU BELIEVE HE OR SHE BELONGS TO.)	
YES	<input checked="" type="checkbox"/>
NO	<input type="checkbox"/>
IS THE INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "NO" also give name and address of person or persons who can make such decisions in case of emergency.)	
YES	<input checked="" type="checkbox"/>
NO	<input type="checkbox"/>
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If "NO" explain why in item 6.)	
YES	<input checked="" type="checkbox"/>
NO	<input type="checkbox"/>
The persons named in item 2 or 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.	

CONFIDENTIAL

(When Filled In)

5. VOLUNTARY ENTRIES		
<p>Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.</p>		
<p>INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.</p> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 10px;"></div>		
<p>ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>		
<p>IF YES, DO YOU HAVE A JOINT ACCOUNT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>		
<p>HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" where is document located?)</p> <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>		
<p>HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" give name(s) and address)</p> <p align="center" style="margin-top: 5px;"><i>In the will</i></p>		
<p>HAVE YOU EXECUTED A POWER OF ATTORNEY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If "Yes", who possess the power of attorney?)</p>		
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS		
7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY <small>(No Approval Required)</small>		
RESIDENCE WHEN EMPLOYED (Full Address)	PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-3 (Full Address)	
8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-3) <small>(To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)</small>		
FULL ADDRESS	DEPUTY DIRECTOR OR DESIGNEE	DATE
	DIRECTOR OF PERSONNEL (when applicable per HR 22-3)	DATE
SIGNED AT <i>Hq</i>	DATE <i>9 Nov 71</i>	<div style="border: 1px solid black; width: 100px; height: 30px;"></div>

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(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.

NAME

LAST

FIRST

MIDDLE

1-6

(Print)

7-24

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42
			11	18	70					210

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER		<input type="checkbox"/> DISPATCH	
<input type="checkbox"/> CABLE		<input checked="" type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT	
<input type="checkbox"/> OTHER (Specify)			
DOCUMENT IDENTIFICATION NO.		DOCUMENT DATE/PERIOD	
REMARKS			
PREPARED BY		REPORT ANNOTATED ON CONTROL DOCUMENT	
JACO		ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED	
C & L DIVISION, CTR.		DATE	
<input checked="" type="checkbox"/> C & T DIVISION		11/5/71	
		SIGNATURE	
		[Signature]	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

30 June 1970

MEMORANDUM FOR: Chief, European Division

FROM : Chief of Station [redacted]

SUBJECT : Promotion Recommendation -
[redacted]

Subject, who has been in grade as a GS-10 just two years, has been Chief of the Registry of the [redacted] Station for eighteen months. Subject, fresh from a Saigon assignment, brought with him a broad and varied background of field experience (Far East) and several Headquarters' assignments. He has been in one or another aspect of records management work since he started with us as a very junior clerk in 1952.

Subject's fitness reports, since he has been in [redacted] testify to the high regard in which he is held by the Station and the excellent results he has managed to achieve. When he arrived at the Station, the start had been made on a file reduction program but an enormous amount of organized work remained to be done. Subject set about it with great enthusiasm and a high degree of professional organization. As a result, the Registry inventory today is the leanest and the most efficient the Station has seen for many a long day, if ever before. To a great extent this can be laid at Subject's own door and he personally did much of the work. At the same time, Subject surveyed and reorganized the overall workload of the Registry and was finally able to recommend to the Station management a reduction of one Registry clerk. The smaller staff has certainly required a more intensive work effort on the part of Registry personnel, which has been attained without any loss of morale; in fact, quite the reverse.

Subject, therefore, emerges as a records management officer who has thoroughly learned his business and a hard-driving, sympathetic and successful supervisor. In the opinion of the Station management, Subject is already quite capable of taking over broader and more senior responsibilities in the records management field. In this respect, however, we do not believe he will be wasting his time [redacted] by spending, as he currently plans to do, an additional year here on the completion of his tour in November. The [redacted] Registry, reflecting the multi-faceted work of the Station, is sufficiently complex an operation to warrant

-2-

Subject's continued attention.

In view of his really excellent performance and high promise,
it is strongly recommended that Subject be promoted to GS-11.

/s/ Bronson Tweedy
COS

~~SECRET~~
(When Filled In)

REPORT OF SERVICE ABROAD												
TO: Office of Personnel, Transactions and Records Branch, Status Section												
SERIAL NO.		NAME										
		LAST			FIRST				MIDDLE			
1-8		(PRINT) 7-28										
INSTRUCTIONS												
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TOY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 86, REVISED.												
PCS DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	27	28	29	CODE	
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION					40-42	
						5 - CANCELLATION						
1	1	8					/				210	
TOY DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TOY (Basic)	CODE	27	28	29	CODE	
25-26	27-28	29-30	31-32	33-34	35-36	4 - CORRECTION					40-42	
						5 - CANCELLATION						
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA												
SOURCE DOCUMENT AND CERTIFICATION												
TRAVEL VOUCHER						OTHER						
CABLE						DATE STATUS OR TIME AND ATTENDANCE REPORT						
OTHER (Specify)												
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE PERIOD						
						1-18-68						
REMARKS												
PREPARED BY			REPORT ANNOTATED BY			REPORT DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED						
REC			DATE									
C & A DIVISION, 2700			895103000									
X T & P DIVISION												
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER												

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(When Filled In)

IMPORTANT

Central Processing Branch has been charged with responsibility (OM 20-6-dated October 1961) for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-6, Employee Conduct, dated 30 July 1962.

[Redacted Signature Box]

Signature

15 NOV 68
drto

JAMES G. ROSS

CONFIDENTIAL
(When Filled In)

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 98, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39	Vietnam	40-42
			10	03	68		1			7/10

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify) <i>teleprint</i>	
DOCUMENT IDENTIFICATION	DOCUMENT DATE/PERIOD
	10/3/68

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
WCO	DATE	SIGNATURE
C & L DIVISION, CTR.	11/5/68	
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

Page 1

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.

NAME

LAST

FIRST

MIDDLE

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 98, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37 38 39		40-42
01	1	467					1	Vietnam	772

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. 764	DOCUMENT DATE/PERIOD
---------------------------------	----------------------

REMARKS

PREPARED BY	REPORT APPROVED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
CCO	DATE 5/22/61	SIGNATURE
C & L DIVISION, CYBER.		
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

CONFIDENTIAL
(When Filled In)

I hereby acknowledge that I have read and understand the contents of Handbook 20-4, Employee Conduct, dated 7 October 1963, and the information brochure for PCS returns, dated May 1964.



JAMES S. WOOLLS

28 NOV 66
Date

CONFIDENTIAL
(When Filled In)

SECRET
(When Filled In)

19 December 1966


MEMORANDUM FOR:

THROUGH : Head of ^{CS} Career Service

SUBJECT : Notification of Designation as a Participant
in the CIA Retirement and Disability System

1. I have determined that you meet the criteria outlined in HR 20-50 for designation as a participant in the CIA Retirement and Disability System. Your designation as a participant was made effective ~~18 December 1966~~.

2. You are hereby notified of your right to appeal this action to the Director of Central Intelligence as specified in HR 20-50. Such appeal must be received in the Office of the Director not later than 30 calendar days from the date of this memorandum.


Emmett D. Echols
Director of Personnel

SECRET

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO: Office of Personnel, Statistical Reporting Branch, ROOM 5 E 2506 Headquarters

EMPLOYEE SERIAL NO.	NAME OF EMPLOYEE			OFFICE/COMPONENT
	LAST	FIRST	MIDDLE	
1-6	(Print)	7-24		28-36
				45

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	CODE	ARRIVAL			DEPARTURE			COUNTRY	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1 - PCS (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39		40-42
3 - CORRECTION									
5 - CANCELLATION	1	04	24	61	09	24	66		375

TDY DATES OF SERVICE

TYPE OF DATA	CODE	DEPARTURE			RETURN			AREA(S)	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
2 - TDY (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39		40-42
4 - CORRECTION									
5 - CANCELLATION									

SOURCE OF RECORD DOCUMENT

THREAT VOUCHER	
CABLE	<input checked="" type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
	5/28 - 9/24/66

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED ON SOURCE DOCUMENT	ABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
C S L DIVISION	DATE	SIGN
<input checked="" type="checkbox"/> C S T DIVISION	10/17/66	

CONFIDENTIAL
(When Filled In)

TRAVEL AGREEMENT BY STAFF EMPLOYEES ASSIGNED TO PERMANENT
DUTY STATION OUTSIDE CONTINENTAL UNITED STATES

1. In accordance with the policy of the Central Intelligence Agency, I agree to serve outside the continental United States a minimum tour of 2 Years from the date of my arrival at my permanent post of duty, unless said tour is sooner terminated by the Government for its convenience, or it is terminated by the Agency for circumstances that are considered by it to be beyond my control.

2. It is understood and agreed that if I terminate for reasons within my control in less than 12 months from the date of arrival at said post, I shall reimburse CIA for all travel expenses, including storage and per diem, incurred in the transporting of myself, my dependents, my household and personal effects and my automobile to my permanent post of duty, and shall pay all return travel and transportation expenses to the United States.

3. It is further understood and agreed that if I terminate for reasons within my control subsequent to the twelfth month but prior to the completion of my tour of duty, I shall pay all return expenses for the travel and transportation of myself, my dependents, my household and personal effects and my automobile to the United States.

WITNESS:

[Empty box for Witness Signature]

[Empty box for Date]

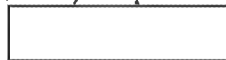
Date: 24 July 66

SECRET

23 MAR 1966

MEMORANDUM FOR: Head, Clandestine Services Career Service

SUBJECT : Notification of Approval of
Quality Step Increase -



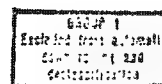
1. I am pleased to send to you the attached
official notification of the approval of the Quality Step
Increase which you recommended for this employee.

2. As this award is designed to encourage
excellence by recognizing and rewarding the employee,
may I ask that you arrange to have this Quality Step
Increase presented at an appropriate ceremony.



Emmett D. Echols
Director of Personnel

SECRET



SECRET

29 MAR 1966

MEMORANDUM FOR: [REDACTED]

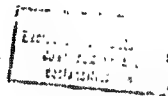
SUBJECT : Quality Step Increase

1. I was pleased to learn that you have been granted a Quality Step Increase. Such a recognition is proof of the high esteem in which you are held by your supervisors in the Clandestine Services.

2. Please accept my personal best wishes. I am confident that your future performance will be of a continuing high quality.

[REDACTED]
Desmond Fitzgerald
Deputy Director for Plans

SECRET



SECRET

CP-257

4 MAR 1966

MEMORANDUM FOR: Deputy Director for Plans
ATTENTION: DDP/OP
SUBJECT: Request for Quality Step Increase
for [] GS-09

1. On the basis of the information presented below, it is recommended that a Quality Step Increase be approved for []

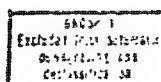
2. [] entered on duty with the Agency in April 1952 as a GS-03 Records and File Clerk assigned to RID. Since that time [] has served as a Records Analyst at Headquarters, [] and since 1961 in the Central Registry Section of the [] [] is 37 years old and has been in grade as a GS-09 since 1958.

3. [] exceptional performance is described by the [] Station as follows:

"A. [] is now on his second tour as Chief of the [] Station Registry. This unit is located at [] and handles all correspondence for all Station elements. In view of the fact that the Station is located [] a great deal of responsibility is given to [] to ensure that action responsibility on incoming cables is rapidly and properly assigned, dispatches are correctly routed and processed, correspondence from other local military agencies is correctly analyzed and routed, the twice-a-day courier system is functioning effectively, and the Station flexowriter is rapidly churning out priority dispatch traffic.

"B. The Registry is presently composed of six employees in addition to [] who is Chief of this unit. [] does an exemplary job in supervising these employees with the result that the Station Registry is a smooth and well-functioning unit.

SECRET



SECRET

"C. In addition to his normal duties, [] is constantly thinking of ways to increase the efficiency of the Station Registry, and to be of greater assistance to the Station as a whole. Several of his ideas have been adopted by the Station with a resulting increase in effectiveness. His positive approach to all problems and his cheerfulness and willingness to perform any task have benefited both the Station and the Agency.

"D. In view of [] demonstrated ability to provide leadership to the Station Registry unit, his positive approach to the solution of the many problems which daily beset this unit, it is strongly recommended that he be promoted from GS-09 to GS-10 at the earliest opportunity."

4. [] has continued to perform in an over-all "Strong" manner as indicated in his recent fitness report. He recently planned and effectively implemented the move of the Cable Secretariat from one location to another. In a dispatch, dated 22 November 1965, the present Chief of Station, [] stated, "There is little I can add to my predecessor's recommendation, dated 9 November 1964, for promotion of [] He is performing his duties as Chief of the [] Station Registry with efficiency and dispatch. He is a strong supervisor who constantly strives to achieve the maximum economy in the use of his personnel and materials."

5. Consideration has been given to the granting of an Honor and Merit Award to [] but in this particular case it appears that a Quality Step Increase is more appropriate.

[]
+ William E. Colby
Chief, Far East Division

APPROVAL RECOMMENDED:

[]
Secretary, CS Panel Section C

MAR 11
1966

MAR 11
1966

Date

SECRET

SECRET

SUBJECT: Request for Quality Step Increase
for [REDACTED] GS-09

CONCUR:

[REDACTED]

DLP/OP

15 March 66
Date

APPROVED:

[REDACTED]

for Director of Personnel

18 Mar '66
Date

SECRET

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO:

Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall

EMPLOYEE SERIAL NO. 1-6	NAME OF EMPLOYEE			OFFICE/COMPONENT 26-28
	LAST (Print)	FIRST	MIDDLE	
				56

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION. (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	CODE	ARRIVAL			DEPARTURE			COUNTRY	OMIT 40-42
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1 - PCS (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39		
3 - CORRECTION									
5 - CANCELLATION	1	04	15	61					375

TDY DATES OF SERVICE

TYPE OF DATA	CODE	DEPARTURE			RETURN			AREA(S)	OMIT 40-42
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
2 - TDY (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39		
4 - CORRECTION									
6 - CANCELLATION									

SOURCE OF RECORD DOCUMENT

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input checked="" type="checkbox"/> DUTY STATUS UP-DOWN AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD 30 MAR - 15 APR 1961
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REMARKS

PREPARED BY	REPORT ANNOTATED ON SOURCE DOCUMENT	ADDITIONAL DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT LISTED	
FISCAL DIVISION	DATE 26 JUNE 1961	SIGNATURE	
FINANCE DIVISION			

3562 09414

Standard Form No. 2809 CHAPTER 4 (1-1-57 P.M.) G.O.P. 7-1000		HEALTH BENEFITS REGISTRATION FORM FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959 (Read Instructions on back of last page. Use only typewriter or ballpoint pen.)		CARRIER'S CONTROL NO. 078-38	
PART A ALL WHO REGISTER MUST FILL IN THIS PART.	1. NAME (LAST) (FIRST) (MIDDLE INITIAL) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	2. DATE OF BIRTH (Month, Day, Year) <div style="border: 1px solid black; padding: 2px;">MONTH DAY YEAR</div>	3. Are you now married? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
	4. YOUR MAILED ADDRESS (NUMBER AND STREET) (CITY AND ZONE NUMBER) (STATE) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	5. SEX MALE <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/>			
	6. Are you covered by, or is any family member listed below covered by or enrolling in, a plan under the Federal Employees Health Benefits Act of 1959 (through the enrollment of another United States or District of Columbia Government employee or annuitant)? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		7. Place an "X" in proper box to show your annual basic salary range. UNDER \$4,000 <input type="checkbox"/> \$4,000 TO \$4,999 <input type="checkbox"/> \$5,000 TO \$5,999 <input checked="" type="checkbox"/> \$6,000 TO \$6,999 <input type="checkbox"/> \$7,000 TO \$7,999 <input type="checkbox"/> \$8,000 TO \$8,999 <input type="checkbox"/> \$9,000 TO \$9,999 <input type="checkbox"/> \$10,000 OR OVER <input type="checkbox"/>		
PART B FILL IN THIS PART IF YOU WISH TO ENROLL IN A HEALTH BENEFITS PLAN. <small>If enrollment is for self only, answer item 1. If enrollment is for self and family, also answer item 2 and item 3. If applicable.</small>	1. I elect to enroll in a health benefits plan as shown below. I authorize deductions to be made from my salary, compensation, or annuity to cover my share of the cost of the enrollment. (Copy the information requested below from inside cover of brochure of the plan you select.)				
	NAME OF PLAN Association Benefits Plan - Family		OPTIONAL PLAN OR PLAN, (ENROLLMENT CODE NUMBER) High 4 2 2		
	2. In space below list all eligible family members without exception. List your wife or husband first, then your unmarried children under age 19, including legally adopted children, and stepchildren and illegitimate children who live with you in a regular parent-child relationship. Include also any unmarried child over 19 who became disabled before age 19 and who, because of the disability, is incapable of self-support. (Attach a doctor's certificate for a disabled child age 19 or over.)				
NAMES OF FAMILY MEMBERS		DATE OF BIRTH (Month, Day, Year)	NAMES OF FAMILY MEMBERS		
Wife or Husband					
3. If you are a female (employee or annuitant)—does the family listed above include a husband who is incapable of self-support by reason of mental or physical disability which can be expected to continue for more than two years? (If answer is "Yes," attach a doctor's certificate.) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					
PART C FILL IN THIS PART IF YOU WISH NOT TO ENROLL OR IF YOU WISH TO CANCEL YOUR ENROLLMENT.	PLACE AN "X" IN ITEM 1 OR ITEM 2, WHICHEVER APPLIES AND ANSWER ITEM 3.				
	1. I elect not to enroll in any plan under the Health Benefits Act. <input type="checkbox"/>		3. The reason for my election is: (Place an "X" in proper box.) (a) I am covered by a plan under the Health Benefits Act through the enrollment of my husband, wife, or spouse. <input type="checkbox"/> (b) I am covered by a health insurance plan which is not under the Health Benefits Act. <input type="checkbox"/> (c) Any other reason. <input type="checkbox"/>		
PART D FILL IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT.	I elect to change my enrollment as shown by the enrollment number and other information in item 8.				
	1. Enrollment code number of present plan: <div style="border: 1px solid black; padding: 2px;">4 2 5</div>		2. Date of event which permits change. (See table on back of duplicate for proper number.) <div style="border: 1px solid black; padding: 2px;">March 22 1964</div>		
PART E ALL WHO REGISTER MUST FILL IN THIS PART.	YOUR SIGNATURE—OF SELF OR PARTY <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		DATE <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
	<small>WARNING—Any intentional false statement in this application or willful misrepresentation relative thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 5 years, or both. (10 U.S.C. 1001.)</small>				
PART F TO BE COMPLETED BY AGENCY.	1. NAME AND ADDRESS OF THE OFFICE HEALTH BENEFITS OFFICER (1-1-1000)		2. DATE RECEIVED BY EMPLOYING OFFICE 3-15-64	3. EFFECTIVE DATE OF ELECTION 3-15-64	
	4. PAYROLL OFFICE NO. 5010		5. PAYROLL ACTION (INITIALS AND DATE)		
REMARKS FOR USE ONLY BY ANNUITANTS AND AGENCY. <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					

SECRET
(When Filled In)

<div style="float: left; font-size: 2em; margin-right: 20px;">19</div> VERIFIED RECORD OF OVERSEAS SERVICE									
TO: Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall									
EMPLOYEE SERIAL NO.		NAME OF EMPLOYEE						OFFICE/COMPONENT	
1-6		LAST (Print)		FIRST		MIDDLE		25-26	
								57	
INSTRUCTIONS USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.									
PCS DATES OF SERVICE									
TYPE OF DATA		ARRIVAL		DEPARTURE			COUNTRY		OMIT
1 - PCS (Basic)		CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR	40-42
3 - CORRECTION		27	28-29	30-31	32-33	34-35	36-37	38-39	
5 - CANCELLATION		1				03	19	59	575
TDY DATES OF SERVICE									
TYPE OF DATA		DEPARTURE		RETURN			AREA(S)		OMIT
2 - TDY (Basic)		CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR	40-42
4 - CORRECTION		27	28-29	30-31	32-33	34-35	36-37	38-39	
5 - CANCELLATION									
SOURCE OF RECORD DOCUMENT									
<input checked="" type="checkbox"/> TRAVEL VOUCHER					DISPATCH				
CABLE					DUTY STATUS OR TIME AND ATTENDANCE REPORT				
OTHER (Specify)									
DOCUMENT IDENTIFICATION NO.					DOCUMENT DATE/PERIOD				
REMARKS									
PREPARED BY		REPORT ANNOTATED ON SOURCE DOCUMENT			ABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED				
FISCAL DIVISION		DATE			SIGNATURE				
FINANCE DIVISION									

Standard Form No. 2877 CHAPTER 1-5 FPMR 5 GAO 509		HEALTH BENEFITS REGISTRATION FOR 1961 FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959 <small>(Trans on back of last page. Use only typewriter or ball point pen.)</small>		EMPLOYER'S CONTROL NO. 082697																									
PART A ALL WHO REGISTER MUST FILL IN THIS PART.	1. NAME (LAST) (FIRST) (MIDDLE INITIAL) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		2. DATE OF BIRTH (The numbers) MONTH DAY YEAR <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		3. Are you now married? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>																								
					3. SEX MALE <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/>																								
	6. Are you covered by, or is any family member listed below covered by or enrolling in, a plan under the Federal Employees Health Benefits Act of 1959 (through the enrollment of another United States or District of Columbia Government employee or annuitant)? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		7. Place an "X" in proper box to show your annual basic salary range. UNDER \$4,000 <input type="checkbox"/> \$4,000 TO \$5,999 <input type="checkbox"/> \$6,000 TO \$9,999 <input checked="" type="checkbox"/> \$10,000 OR OVER <input type="checkbox"/>																										
PART B FILL IN THIS PART IF YOU WISH TO EN- ROLL IN A HEALTH BENEFITS PLAN.	1. I elect to enroll in a health benefits plan as shown below. I authorize deductions to be made from my salary, compensation, or annuity to cover my share of the cost of the enrollment. (Copy the information requested below from inside cover of brochure of the plan you select.) <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> NAME OF PLAN FEDERAL EMPLOYEES PLAN </div> <div style="width: 20%;"> OPTION (HIGH OR LOW) LOW </div> <div style="width: 35%;"> ENROLLMENT CODE NUMBER 1 2 5 </div> </div>																												
	2. In space below list all eligible family members without exceptions. List your wife or husband first, then your unmarried children under age 19, including legally adopted children and stepchildren and illegitimate children who live with you in a regular parent-child relationship. Include also any unmarried child over 19 who became disabled before age 19 and who, because of the disability, is incapable of self-support. (Attach a doctor's certificate for a disabled child age 19 or over.)																												
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAMES OF FAMILY MEMBERS</th> <th style="width: 15%;">DATE OF BIRTH (Month, Day, Year)</th> <th style="width: 35%;">NAMES OF FAMILY MEMBERS</th> <th style="width: 15%;">DATE OF BIRTH (Month, Day, Year)</th> </tr> </thead> <tbody> <tr> <td>Wife or Husband</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	Wife or Husband																			
	NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)																									
Wife or Husband																													
3. If you are a female (employee or annuitant)—does the family listed above include a husband who is incapable of self-support by reason of mental or physical disability which can be expected to continue for more than one year? (If answer is "Yes," attach a doctor's certificate.) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>																													
PART C FILL IN THIS PART IF YOU WISH NOT TO ENROLL OR IF YOU WISH TO CANCEL YOUR ENROLLMENT.	PLACE AN "X" IN ITEM 1 OR ITEM 2, WHICHEVER APPLIES AND ANSWER ITEM 3.																												
	<table style="width: 100%;"> <tr> <td style="width: 40%;"> 1. I elect not to enroll in any plan under the Health Benefits Act. <input type="checkbox"/> </td> <td style="width: 60%;"> 3. The reason for my election is (Place an "X" in proper box): (a) I am covered by a plan under the Health Benefits Act through the enrollment of my husband, wife, or parent. <input type="checkbox"/> </td> </tr> <tr> <td> 2. I elect to cancel my present enrollment under the Health Benefits Act. <input type="checkbox"/> </td> <td> (b) I am covered by a health insurance plan which is not under the Health Benefits Act. <input type="checkbox"/> </td> </tr> <tr> <td></td> <td> (c) Any other reason. <input type="checkbox"/> </td> </tr> </table>					1. I elect not to enroll in any plan under the Health Benefits Act. <input type="checkbox"/>	3. The reason for my election is (Place an "X" in proper box): (a) I am covered by a plan under the Health Benefits Act through the enrollment of my husband, wife, or parent. <input type="checkbox"/>	2. I elect to cancel my present enrollment under the Health Benefits Act. <input type="checkbox"/>	(b) I am covered by a health insurance plan which is not under the Health Benefits Act. <input type="checkbox"/>		(c) Any other reason. <input type="checkbox"/>																		
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	<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE (OF EMPLOYEE) <div style="border: 1px solid black; padding: 5px;">17 / 11/61</div> </div> <div style="width: 60%;"> DATE RECEIVED IN EMPLOYING OFFICE <div style="border: 1px solid black; padding: 5px;">2/27/61</div> </div> </div>																												
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	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 4. PAYROLL OFFICE NO. <div style="border: 1px solid black; height: 20px; width: 100%;"></div> </div> <div style="width: 55%;"> 5. PAYROLL ACTION (INITIALS AND DATE) <div style="border: 1px solid black; height: 20px; width: 100%;"></div> </div> </div>																												
REMARKS FE 110532 1-1579																													

Triuplicate—To Employing Office

APRIL 1960

CONFIDENTIAL
(When Filled In)

TRAVEL AGREEMENT BY STAFF EMPLOYEES ASSIGNED TO PERMANENT
DUTY STATION OUTSIDE CONTINENTAL UNITED STATES

1. In accordance with the policy of the Central Intelligence Agency, I agree to serve outside the continental United States a minimum tour of Twenty-four months from the date of my arrival at my permanent post of duty, unless said tour is sooner terminated by the Government for its convenience, or it is terminated by the Agency for circumstances that are considered by it to be beyond my control.

2. It is understood and agreed that if I terminate for reasons within my control in less than 12 months from the date of arrival at said post, I shall reimburse CIA for all travel expenses, including storage and per diem, incurred in the transporting of myself, my dependents, my household and personal effects and my automobile to my permanent post of duty, and shall pay all return travel and transportation expenses to the United States.

3. It is further understood and agreed that if I terminate for reasons within my control subsequent to the twelfth month but prior to the completion of my tour of duty, I shall pay all return expenses for the travel and transportation of myself, my dependents, my household and personal effects and my automobile to the United States.

WITNESS:

[Redacted Signature Box]

[Redacted Signature Box]

Date: 21 Feb. 1961

Standard Form No. 2809 CHAPTER I-X P.P.M. 6 (Rev. 1-50)		HEALTH BENEFITS REGISTRATION FOR 1 2362		CLASSIFICATION NO. 000000	
FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959 (Read instructions on back of last page. Use only typewriter or ballpoint pen.)					
PART A ALL WHO REGISTER MUST FILL IN THIS PART.	1. NAME (LAST) (FIRST) (MIDDLE INITIAL)		2. DATE OF BIRTH (Use numbers)		3. Are you now married? YES <input checked="" type="checkbox"/> 1 NO <input type="checkbox"/> 2
	4. Are you covered by, or is any family member listed below covered by or enrolling in, a plan under the Federal Employees Health Benefits Act of 1959 (through the enrollment of another United States or District of Columbia Government employee or annuitant)? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		5. Place an "X" in proper box to show your annual basic salary range. UNDER \$4,000 <input type="checkbox"/> 1 \$4,000 TO \$4,999 <input type="checkbox"/> 2 \$5,000 TO \$5,999 <input checked="" type="checkbox"/> 3 \$6,000 TO \$9,999 <input checked="" type="checkbox"/> 4 \$10,000 OR OVER <input type="checkbox"/> 5		
	6. Select to enroll in a health benefits plan as shown below. I authorize deductions to be made from my salary, compensation, or annuity to cover my share of the cost of the enrollment. (Copy the information requested below from inside cover of brochure of the plan you select.)				
PART B FILL IN THIS PART IF YOU WISH TO EN- ROLL IN A HEALTH BENEFITS PLAN. <small>If enrollment is for self only, answer item 1. If enrollment is for self and family, also answer item 2 and item 3 if applicable.</small>	NAME OF PLAN		OPTION (HIGH OR LOW)		ENROLLMENT CODE NUMBER
	2. In space below list all eligible family members without exception. List your wife or husband first, then your unmarried children under age 19, including legally adopted children and stepchildren and illegitimate children who live with you in a regular parent-child relationship. Include also any unmarried child over 19 who became disabled before age 19 and who, because of the disability, is incapable of self support. (Attach a doctor's certificate for a disabled child age 19 or over.)				
	NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	
	Wife or Husband	[] 1		[] 6	
PART C FILL IN THIS PART IF YOU WISH NOT TO ENROLL OR IF YOU WISH TO CHANGE YOUR ENROLLMENT.	3. If you are a female (employee or annuitant)—does the family listed above include a husband who is incapable of self support by reason of mental or physical disability which can be expected to continue for more than one year? (If answer is "Yes," attach a doctor's certificate.) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				
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	1. Enrollment code number of present plan.	2. Number of event which permits change (See table on back of booklet for proper number)	3. Date of event which permits change		
PART E ALL WHO REGISTER MUST FILL IN THIS PART.	4. 2 1 2				
	5. 6 1960				
PART F TO BE COMPLETED BY AGENCY.	HEALTH BENEFITS OFFICER				
	HEALTH BENEFITS OFFICER				
REMARKS					

Standard Form No. 2809 CHAPTER I-11 P.M. 6-1-60 (Rev.)		HEALTH BENEFITS REGISTRATION FORM FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959 (Read Instructions on back of last page. Use only black ink or ballpoint pen.)		CARRIER'S CONTRACT NO. 3362 093078																											
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REMARKS FOR USE ONLY BY ANNUITANTS AND AGENCY. <div style="border: 1px solid black; height: 40px; width: 100%;"></div>																															

Triplicate—To Employing Office

AFR 1-59

10564

CONFIDENTIAL
(When Filled In)

TRAVEL AGREEMENT BY STAFF EMPLOYEES ASSIGNED TO PERMANENT
DUTY STATION OUTSIDE CONTINENTAL UNITED STATES

1. In accordance with the policy of the Central Intelligence Agency, I agree to serve outside the continental United States a minimum tour of 24 months from the date of my arrival at my permanent post of duty, unless said tour is sooner terminated by the Government for its convenience, or it is terminated by the Agency for circumstances that are considered by it to be beyond my control.

2. It is understood and agreed that if I terminate for reasons within my control in less than 12 months from the date of arrival at said post, I shall reimburse CIA for all travel expenses, including storage and per diem, incurred in the transporting of myself, my dependents, my household and personal effects and my automobile to my permanent post of duty, and shall pay all return travel and transportation expenses to the United States.

3. It is further understood and agreed that if I terminate for reasons within my control subsequent to the twelfth month but prior to the completion of my tour of duty, I shall pay all return expenses for the travel and transportation of myself, my dependents, my household and personal effects and my automobile to the United States.

WITNESS:

[Redacted Signature Box]

[Redacted Signature Box]

te: 23 Aug 57

CONFIDENTIAL

29 November 1956

[] Station wishes to express its appreciation to [] his most diligent performance of duty during his recent TDY here, his highly cooperative attitude and above all, his extreme eagerness to get a job done well and expeditiously.

It was largely with his help that [] station was able to screen and process the voluminous material which needed to be handled in order to establish a coordinated and integrated record and file maintenance system.

All [] Station personnel connected with the work of the TSI Team members were impressed and gratified by the eagerness with which they assisted with details and helped with problems that were outside the responsibilities of their assigned task. Their pleasant manner, apt suggestions, their excellent cooperation and untiring efforts to complete more than the initially estimated workload, all created a most favorable impression which reflects much credit not only on the team members themselves but on the Records Integration Branch as well.

CONFIDENTIAL

CONFIDENTIAL
(When Filled In)

144 Cecil Hall -
Area Branch
10-3

1. NAME (Last) _____ (First) _____ (Middle) _____		2. THIS DATE 6 August 1956			
3. THE FOLLOWING AGENCY SPONSORED INSURANCE PROGRAMS HAVE BEEN EXPLAINED TO ME <input checked="" type="checkbox"/> WAR AGENCIES EMPLOYEES PROTECTIVE ASSOCIATION (WAEPA) <input checked="" type="checkbox"/> PNEUMONIC DISEASES <input checked="" type="checkbox"/> GROUP HOSPITALIZATION INCORPORATED (GHI) <input checked="" type="checkbox"/> INCOME REPLACEMENT <input checked="" type="checkbox"/> MUTUAL BENEFIT OF CHINA - HOSPITALIZATION * <i>Had for</i> <input checked="" type="checkbox"/> UNITED LIFE INSURANCE (ULIC) * CASH PAYMENT OF PREMIUMS AT THE TIME <input checked="" type="checkbox"/> AIR TRIP INSURANCE EMPLOYEE APPLIED FOR INSURANCE MUST COVER THE PERIOD OF TIME HE WILL BE AWAY FROM HEADQUARTERS.					
4. ITINERARY (To be completed only for individuals making application for Air Trip Insurance) WDC - - WASH - TDY					
5. I AM NOW PARTICIPATING, OR WOULD LIKE TO PARTICIPATE IN THE INSURANCE PROGRAMS LISTED BELOW.			SIGNATURE OF EMPLOYEE <div style="border: 1px solid black; height: 30px; width: 100%;"></div>		
TYPE OF POLICY	DESIRED	NOW HAVE	POLICY NUMBER	DEDUCTIONS AUTHORIZED EACH PAY PERIOD	CASH PAID
AIR TRIP FLIGHT	✓	✓	2017		\$4.00
6. I DO NOT ELECT TO PARTICIPATE IN ANY OF THE STATED INSURANCE PROGRAMS			SIGNATURE OF EMPLOYEE <div style="border: 1px solid black; height: 30px; width: 100%;"></div>		
7. EMPLOYEE INTERVIEWED BY <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		CPD (Signature) LPO (Signature) 			
8. REMARKS					
When completed, the original of this form should be forwarded to TARB for incorporation in the employee's official personnel folder. The copy should be forwarded to CPD for retention in CPD files.					

INSURANCE QUESTIONNAIRE

CENTRAL INTELLIGENCE AGENCY

2430 E STREET NW.

WASHINGTON 25, D. C.

Date 23 July 1954

Dear

1. This is to notify you that the United States Government, as represented by the Central Intelligence Agency, has accepted your employment effective 25 April 1954.

Position: I.O.

Base Salary: GS-5 \$3535.00

2. You will be:

a. Entitled to annual and sick leave in accordance with Civil Service Commission rules and regulations, or such other provisions of law or regulations as may be established in lieu thereof.

b. Reimbursed for travel expenses in accordance with CIA Regulations or Standardized Government Travel Regulations, as amended.

c. If stationed outside continental United States, granted such monetary allowances as are prescribed by CIA Regulations.

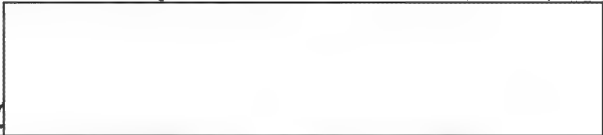
3. As a condition of your employment by the Central Intelligence Agency, you are subject to assignment to tours of duty at posts outside the continental United States. Each time you are so assigned, unless otherwise specified in advance by CIA, you will be required to remain at the post to which assigned for a period of 24 months from the date of arrival thereat, unless sooner transferred, reassigned or separated for reasons beyond your control. If you wish to return to the United States for personal reasons during that period, all travel and transportation costs incident to such return will be borne by you, with no expense to the Government.

4. If this employment is for assignment to an overseas post, it is understood and agreed that, unless earlier separated for reasons beyond your control, you will remain in Government service for 12 months after your arrival at your first overseas post, and if you violate this agreement, any money expended by the United States on account of your travel and the transportation of your immediate family and household goods will be considered a debt due to the United States.

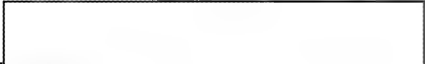
5. Employment is conditioned upon satisfactory completion of the training courses prescribed by CIA and satisfactory performance of duty for a total period of six months from date of employment. In the event

either training or performance of duty is deemed unsatisfactory by CIA, you will be offered other types of employment, if available, or your employment will be terminated.

6. Your appointment is for such time as your services may be required and funds are available for the work of CIA. Notice of termination will be given you by procedure similar to that provided by Civil Service rules and regulations.


Official authorized to sign letters of appointment.

I accept the above agreement as a condition of my employment by CIA.


Employee

23 July 54
Date

2200

FE-1

Wing E 15-2-100

INSURANCE QUESTIONNAIRE

Page 1

1. NAME 2. THIS DATE 10 June 54

3. THE FOLLOWING AGENCY SPONSORED INSURANCE PROGRAMS HAVE BEEN EXPLAINED TO ME:

☒ WAR AGENCIES EMPLOYEES PROTECTIVE ASSOCIATION (WARPA) ☐ MUTUAL BENEFIT OF OMAHANI ☒ GROUP HOSPITALIZATION INCORPORATED☒ AIR TRIP INSURANCE

4. ITINERARY (To be completed only for

Lvg Wash. 2 July 54

5. I AM NOW PARTICIPATING, OR WOULD LIKE TO PARTICIPATE IN THE FOLLOWING INSURANCE PROGRAMS:

TYPE OF POLICY	DESIRED	NOW HAVE	POLICY NUMBER	DEDUCTIONS AUTHORIZED EACH PAY PERIOD	CASH PAID
WAFERA	<input checked="" type="checkbox"/>		#2574	P/R - \$8.33-9/14/54	\$27.25
AIR TRIP	<input checked="" type="checkbox"/>		28354		\$4.00

SIGNATURE

6. I DO NOT ELECT TO PARTICIPATE IN ANY OF THE STATED INSURANCE PROGRAMS:

SIGNATURE

7. EMPLOYEE INTERVIEWED BY:

CPB:

SIGNATURE

IACB:

SIGNATURE

8. REMARKS:

When completed, the original of this form should be forwarded to T&D for incorporation in the employee's official personnel folder. The copy should be forwarded to CPB for retention in CPB files.

APPOINTMENT AFFIDAVITS

IMPORTANT.—Before swearing to these appointment affidavits, you should read and understand the attached information for appointees

C.I.A.

(Department or agency)

Washington, D.C.

(Bureau or division)

(Place of employment)

I, , do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, **SO HELP ME GOD.**

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

April 21, 1952
(Date of entrance on duty)

Subscribed and sworn before me this 21st day of April, A. D. 1952,

at Washington
(City)

D.C.

[SEAL]

(Signature of officer)

J. W. C. 16016A
(Title)

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (Street and number, city and State)

--	--

--	--

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	ITEM NO.	10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS <small>WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY</small>
5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X			
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? <i>If your answer is "Yes", give details in Item 10.</i>		X		
7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? <i>If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of voluntary or involuntary separation after 5 years' service; amount of retirement pay, and under what retirement act; and rating, if retired from military or naval service.</i>		X		
8. SINCE YOU FILED APPLICATION FOR THIS APPOINTMENT HAVE YOU BEEN DISCHARGED, OR FORFEITED RIGHTS FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY EMPLOYER? <i>If your answer is "Yes", give in Item 10 the name and address of employer, date and reason in each case.</i>		X		
9. HAVE YOU EVER BEEN ARRESTED FOR TRAFFIC VIOLATIONS FOR WHICH YOU WERE FINED \$25 OR LESS OR FORFEITED COLLATERAL OF \$5 OR LESS? SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT? <i>If your answer is "Yes", list each case under Item 10. Give in each case: (1) The date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any; or other disposition of the case. If appointed, your fingerprints will be taken.</i>		X		

INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in accordance with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointments.

This form should be checked for falsification of office, pension, suitability in connection with any record of criminal record or arrest, and particularly for the following:

(1) *Identity of appointee*—It is the duty of the appointing officer to guard against impersonation and to determine beyond reasonable doubt that the appointee is the same person whose appointment was authorized. The appointee's signature and handwriting are to be compared with the application and other pertinent papers. If the appointee is qualified in a written examination, the signature on the form should be compared with the signature on the certification there, which was signed in the examination room. His physical appearance may be checked against the medical certificate. The appointing officer also has questioned his personal history for agreement with his previous statements.

(2) *Age*—If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Until such determination is made, the appointment may not be consummated.

(3) *Citizenship*—The appointing officer is responsible for observing the citizenship provisions of (1) the Civil Service Rules and (2) appropriation acts. Each act constitutes an affidavit for both persons and is acceptable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointment should not be consummated until clearance has been secured from the certifying office of the Civil Service Commission.

(4) *Members of Family*—Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under appointment or permanent appointment in the executive service, no other member of such family is eligible for probationary or permanent appointment in the executive service. The appointments of persons entitled to veteran preference are not subject to this requirement. The members of family provision does not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.

STATEMENT OF FEDERAL CIVILIAN AND MILITARY SERVICE				OFFICE 050		DIVISION RL					
NAME (Last) (First) (Middle)				BRANCH Treasury to Record		SECTION File					
I. FEDERAL CIVILIAN SERVICE (BEGIN WITH THIS AGENCY AND FOLLOW IN REVERSE CHRONOLOGICAL ORDER)											
AGENCY	LOCATION	FROM			TO			TOTAL SERVICE			
		DA.	MO.	YR.	DA.	MO.	YR.	DA.	MO.	YR.	
C. I. A.	April 27, 1952	21	4	1952							
Treasury Dept	15 1/2 Penn	3	11	1951	22	4	1952	10	5	-	
Treasury Dept.	15 1/2 Penn	19	5	1950	19	9	1950	1	4		
<div style="position: absolute; left: 100px; top: 100px;"> SC 11/12/48 verified 10/23/51 JR </div>											
Total Civilian Service								10	9	-	
II. MILITARY SERVICE (INCLUDE ONLY PERIODS OF ACTIVE DUTY DO NOT INCLUDE TERMINAL LEAVE)											
BRANCH OF SERVICE	FROM			TO			TOTAL SERVICE				
	DA.	MO.	YR.	DA.	MO.	YR.	DA.	MO.	YR.		
Army	3	10	1946	12	4	1948	10	8	1		
Army	19	10	1950	7	8	1951	19	7			
Total Military Service								9	5	2	
III. CERTIFICATION											
I swear (or affirm) I hereby swear that the above Civilian and Military service is complete and accurate to the best of my knowledge. <u>April 21, 1952</u> DATE											
SIGNATURE OF EMPLOYEE <div style="border: 1px solid black; width: 200px; height: 40px; margin: 0 auto;"></div>											
IV. REMARKS: (CONCERNING ABOVE SERVICE)											
V. FOR PERSONNEL OFFICE USE ONLY TOTAL CREDITABLE SERVICE DAYS MONTHS YEARS 25 1 3 505C16016A JED 12-8-48 as of 21 April 1952											

PERSONNEL QUALIFICATION QUESTIONNAIRE

SECRET SECURITY INFORMATION

1. Serial No. (no entry)	2. NAME: (last) (first) (middle) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	3. Office <i>RI/FI</i>
4. Date of Birth	5. Sex: <input checked="" type="checkbox"/> male (1) <input type="checkbox"/> female (2)	6. Employment Date: <i>April 1952</i>
7. Citizenship: <input checked="" type="checkbox"/> U.S. <input type="checkbox"/> Other	8. Acquired By: (1) <input checked="" type="checkbox"/> Birth (2) <input type="checkbox"/> Marriage (3) <input type="checkbox"/> Naturalization (4) <input type="checkbox"/> Other (specify) Year U.S. citizenship acquired, if not by birth	

SEC. I. EDUCATION

1. Extent: (circle one)
- | | | |
|--|--|-------------------|
| 1. Less than high school | <input checked="" type="radio"/> 4. Two years college, or less | 8. Masters degree |
| 2. High school graduate | 5. Over two years, no degree | 9. Doctors degree |
| 3. Trade, Business or Commercial school graduate | 6. Bachelor degree | |
| | 7. Post-graduate study (minimum 8 sem. hrs.) | |

2. College or University Study:

Name and location of College or University	Major	Minor	Dates att'd		Yrs Compl		Degree Recd		Sem Hrs
			From	To	Day	Night	Title	Date	
Wakers Business School - Grand Forks N. Dakota	Accounting	Law	Oct 48	Feb 50			Junior Accounting Diploma		
Strayer College Washington D. C.	Accounting	Law	Now attending						

3. Trade, Commercial, and Specialized Training:

School	Attendance Dates			Study or Specialization
	From	To	Tot. mo's	

4. Military, Intelligence or Investigative training (full time duty as a student in specialized schools such as intelligence, communications, ordnance disposal, etc.)

School	Attendance Dates			Study or Specialization
	From	To	Tot. mo's	

SEC. II. WORK EXPERIENCE

1. State the nature of duties performed with this organization, starting with your present position. Approximate dates (month and year) are sufficient. Use a continuation sheet, if necessary, to adequately describe your duties.

From <u>April 52</u> To <u>Nov 54</u> Tot. mos. <u>7</u>	Description of Duties:
Grade <u>GS-4</u> Salary <u>3175</u> yr	<u>Supervise the changing of the folders from folders to single documents.</u>
Office <u>RI/FI</u>	<u>Automated documents for P&H</u>
Position	<u>As requests and other general office duties.</u>
Title: <u>CLERK</u>	
Duty Title: <u>General Office Work</u>	Duty Station, if overseas:
From <u> </u> To <u> </u> Tot. mos. <u> </u>	Description of Duties:
Grade <u> </u> Salary <u> </u>	
Office <u> </u>	
Position	
Title: <u> </u>	
Duty Title: <u> </u>	Duty Station, if overseas:
From <u> </u> To <u> </u> Tot. mos. <u> </u>	Description of Duties:
Grade <u> </u> Salary <u> </u>	
Office <u> </u>	
Position	
Title: <u> </u>	
Duty Title: <u> </u>	Duty Station, if overseas:
From <u> </u> To <u> </u> Tot. mos. <u> </u>	Description of Duties:
Grade <u> </u> Salary <u> </u>	
Office <u> </u>	
Position	
Title: <u> </u>	
Duty Title: <u> </u>	Duty Station, if overseas:
From <u> </u> To <u> </u> Tot. mos. <u> </u>	Description of Duties:
Grade <u> </u> Salary <u> </u>	
Office <u> </u>	
Position	
Title: <u> </u>	
Duty Title: <u> </u>	Duty Station, if overseas:

SEC. II. WORK EXPERIENCE (CONT'D.)

2. Previous Employment: Describe your previous work experience in sufficient detail to permit full recognition of your qualifications. Include military work experience. List last position first.

From <u>Jan 52</u> To <u>Jan 54</u> Tot. mo's <u>4</u>	Exact Title of your position <u>Fiscal</u>
Classification Grade (if in Federal Service) <u>GS-3</u> Salary <u>2950</u>	<u>Accounting Clerk</u>
Number and Class of Employees Supervised:	Description of Duties: <u>Working with</u>
Employer <u>Treasury Dept.</u>	<u>Mexican Claims</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Div. of Investments</u>	
	Duty Station if overseas:
From <u>May 50</u> To <u>Jan 54</u> Tot. mo's <u>7</u>	Exact Title of your position <u>Fiscal</u>
Classification Grade (if in Federal Service) <u>GS-2</u> Salary <u>2150</u>	<u>Accounting Clerk</u>
Number and Class of Employees Supervised:	Description of Duties: <u>verified checks</u>
Employer <u>Treasury Dept.</u>	<u>for correct names, addresses</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Div. of Investments</u>	<u>and money.</u>
	<u>Other (3 months of this period</u>
	<u>spent in the Army</u>
	Duty Station if overseas:
From <u> </u> To <u> </u> Tot. mo's <u> </u>	Exact Title of your position <u> </u>
Classification Grade (if in Federal Service) <u> </u> Salary <u> </u>	Description of Duties: <u> </u>
Number and Class of Employees Supervised: <u> </u>	
Employer <u> </u>	
Kind of Business or organization (i.e., paper products mfr, public utility) <u> </u>	
	Duty Station if overseas:
From <u> </u> To <u> </u> Tot. mo's <u> </u>	Exact Title of your position <u> </u>
Classification Grade (if in Federal Service) <u> </u> Salary <u> </u>	Description of Duties: <u> </u>
Number and Class of Employees Supervised: <u> </u>	
Employer <u> </u>	
Kind of Business or organization (i.e., paper products mfr, public utility) <u> </u>	
	Duty Station if overseas:
From <u> </u> To <u> </u> Tot. mo's <u> </u>	Exact Title of your position <u> </u>
Classification Grade (if in Federal Service) <u> </u> Salary <u> </u>	Description of Duties: <u> </u>
Number and Class of Employees Supervised: <u> </u>	
Employer <u> </u>	
Kind of Business or organization (i.e., paper products mfr, public utility) <u> </u>	
	Duty Station if overseas:

SEC. II. WORK EXPERIENCE (CONT'D)

3. Special Work Experience: Check any of the following organizations by which you may have been employed.

- | | |
|--|--|
| 01 <input type="checkbox"/> U.S. Secret Service | 24 <input type="checkbox"/> Air Force A-2 |
| 02 <input type="checkbox"/> Civil Police | 25 <input type="checkbox"/> Foreign Economic Admin. |
| 03 <input type="checkbox"/> Military Police | 26 <input type="checkbox"/> Counter Intelligence Corps |
| 04 <input type="checkbox"/> U.S. Border Patrol | 27 <input type="checkbox"/> Immigration & Naturalization |
| 05 <input type="checkbox"/> U.S. Narcotics Squad | 28 <input type="checkbox"/> Strategic Services Unit |
| 06 <input type="checkbox"/> FBI | 29 <input type="checkbox"/> Foreign Service, State Dept. |
| 07 <input type="checkbox"/> Criminal Investigation Div. | 30 <input type="checkbox"/> Central Intelligence Group |
| 21 <input type="checkbox"/> Office of Naval Intelligence | 31 <input type="checkbox"/> Armed Forces Security Agency |
| 22 <input type="checkbox"/> Office of War Information | 32 <input type="checkbox"/> Coordinator of Information |
| 23 <input type="checkbox"/> Army G-2 | 33 <input type="checkbox"/> Office of Facts & Figures |
| 20 <input type="checkbox"/> Office of Strategic Services | 34 <input type="checkbox"/> Board of Economic Warfare |
| | 35 <input type="checkbox"/> Federal Communications Comm. |

SEC. III. FOREIGN LANGUAGES

List below the foreign languages in which you have some competence. Be sure to include uncommon modern languages. Check (X) your competence and how acquired.

LANGUAGE	COMPETENCE						HOW ACQUIRED				
	Equivalent to Native Fluency *	Fluent but obviously Foreign *	Adequate for Research **	Adequate for Travel	Limited Knowledge		Native of Country	Prolonged Residence	Contact (Parents, etc.)	Academic Study	

* If you have checked 'Fluent' for a language that has significant difference in spoken and written form (e.g., Arabic), explain your competence herein _____

**Specialized Language Competence: Describe ability to do specialized language work involving vocabularies and terminology in the scientific, engineering, telecommunications, and military fields. List the language with the type of speciality. _____

SEC. IV. AREA KNOWLEDGE

1. List below any foreign countries or regions of which you have knowledge gained as a result of residence, travel or study. Study can mean either academic study, or study of a foreign country resulting from an intelligence, military, commercial or professional work assignment.

Country or Region	Dates of Residence, Study Etc.	Manner in Which Knowledge Was Acquired (check (X) one)		
		Residence	Travel	Study
Tokyo, Japan	Jan 47 - March 48	X (Army)		
Tokyo, Japan	Jan 47 - March 48	X (Army)		
Korea	Dec 50 - Jan 51	X (Army)		

2. Specialized Knowledge of Area

List specialized knowledge of foreign country such as knowledge of terrain, coasts and harbors, utilities, railroads, industries, political parties, etc., gained as a result of study or work assignment. Include name of employer or organization.

Country	Type of Knowledge	How and When Gained

SEC. V. TYPING AND STENOGRAPHIC SKILLS (PRESENT UTILIZATION)

Skill	Per Cent of Time Used	Not Used	WPM (Approximate Proficiency)	Prefer Assignment Using Skill Oftener
Typing	1. 54%	2.	35	1. Yes 2. No
Shorthand	1.	2. ✓		1. Yes 2. No

Shorthand System: 1. Manual 2. Machine 3. Speedwriting.

SEC. VI. LICENSES, HOBBIES, SPECIAL QUALIFICATIONS

1. Licenses: List any licenses or certification such as teachers, pilot, marine, etc.	2. Hobbies: List any hobbies such as sailing, skiing, writing, or other special qualifications.

SEC. VII. PROFESSIONAL AND ACADEMIC HONORS

List any professional or academic associations or honorary societies in which you hold membership.

SEC. VIII. PUBLICATIONS

List below the type of writing (non-fiction; professional or scientific articles, general interest subjects, current events, etc; fiction: novels, short stories, etc.) of any published materials of which you were author or co-author.

SEC. IX. INVENTIONS

Describe any devices you have invented as to type of work for which intended and whether patented.

Device	Patented			
	(1)	Yes	(2)	No
	(1)	Yes	(2)	No
	(1)	Yes	(2)	No

SEC. X. TESTS (Within present organization)

Describe below the type of tests which you have taken.

Type of Test	Date Taken

SEC. XI. PHYSICAL HANDICAPS

List any physical handicaps you may have.

<i>None</i>

SEC. XII. OVERSEAS ASSIGNMENT

Are you willing to accept periodic tour of duty overseas?

(1) 2 year Tour <input checked="" type="checkbox"/>	(2) 4 year Tour <input type="checkbox"/>	(3) Not interested <input type="checkbox"/>
---	--	---

SEC. XIII. WORK ASSIGNMENT

In view of your total experience and education, for what assignment do you think you are best qualified?

<i>One in which I may be able to use my accounting experience, such as in finance work or administrative work.</i>

SEC. XIV. MILITARY STATUS

1. Present Draft Status
Have you registered under the Selective Service Act of 1948? ☒ Yes ☐ No.
If yes, indicate your present draft classification 4 F

2. Present Reserve or National Guard Status
Do you now have Reserve or National Guard Status ☐ Yes ☒ No.
If yes, complete the following.

1. ☐ National Guard
2. ☐ Air National Guard
3. ☐ Active Reserve Status (member of organized unit)
4. ☐ Inactive Reserve Status

Service ARMY Grade P.F.C. Serial Number

Reserve Unit with which currently affiliated _____

Service Mobilization Assignment, if any _____

Location of Service Records, if known Washington 25, D.C.

SEC. XV. TRAINING

List the training courses or subjects you have taken in this organization.

Course or Subject	(from) Dates (to)	Hours

SEC. XVI. REMARKS

Use this space to indicate any other qualifications you may have which you do not describe above.

DATE Nov. 13, 1952

SIGNATURE

WEAR

REPORT OF QUALIFICATIONS

NOTE: THIS REPORT MUST NOT BE DISCUSSED WITH APPLICANT OR EMPLOYEE.

NAME OF EMPLOYEE (OR APPLICANT)

Asst. Clk.

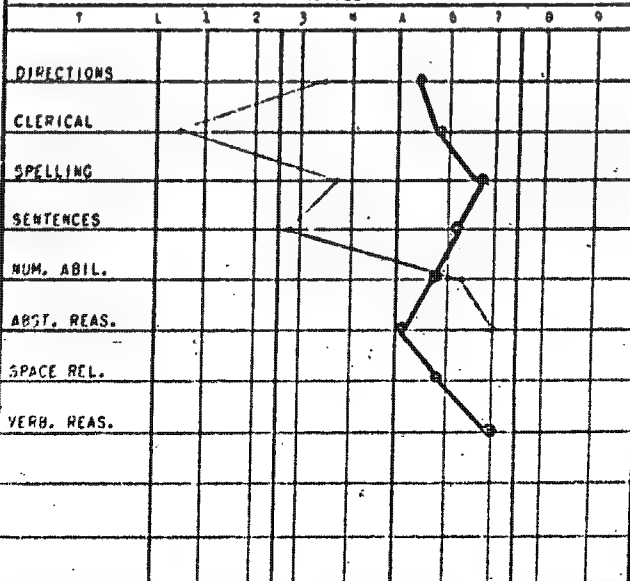
THIS DATE

20 December 1951

TEST RECORD

NOTE: PRINTED BLACK LINE REPRESENTS MEAN PERCENTILE RANKINGS OF GS-4'S. COLORED LINE REPRESENTS PERCENTILE RANKINGS FOR THIS PARTICULAR SUBJECT.

PROFILE



TYPING

GROSS NET ERRORS

28 18 10

SHORTHAND

1

2

3

TOT. TIME

EVALUATION OF EDUCATION AND EXPERIENCE

TYPE OF POSITION

OUTSTANDING

SUPERIOR

ADEQUATE

WEAK

INADEQUATE

EDUCATION

DIRECT EXPERIENCE

INDIRECT EXPERIENCE

EDUCATION

DIRECT EXPERIENCE

INDIRECT EXPERIENCE

EDUCATION

DIRECT EXPERIENCE

INDIRECT EXPERIENCE

QUALIFICATIONS TECHNICIAN

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST	
2. NAME (Last, First, Middle) <u>2018028</u>		25 August 1976	
3. POSITION TITLE Records Admin Officer		4. GRADE GS-12	
5. OFFICE, DIVISION, BRANCH DDO/ACS/ASD		6. EMPLOYER'S EXT. 6352	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input checked="" type="checkbox"/> ANNUAL <i>Feb 6</i> <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT <div><div>ETO</div><div>STATION</div><div>TDY OR PCS</div><div>TYPE OF COVER</div><div>NO. OF DEPENDENTS TO ACCOMPANY</div><div>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</div></div> <input type="checkbox"/> RETURN FROM OVERSEAS <div><div>ETA</div><div>STATION</div><div>NO. OF DEP.'S</div></div>	
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES <input type="checkbox"/> NO		<div></div> <div>ROOM NO. & BUILDING VI-44 HQS</div> <div>EXT. 6346</div>	
10. COMMENTS			
11. REPORT OF EVALUATION Annual Exam Completed.			
DATE 4 October 1976		SIGNATURE FOR CHIEF OF MEDICAL STAFF OIS/PEO	

SECRET

1. NAME (Last, First, Middle)		2. DATE OF BIRTH		3. GRADE	
				GS-10	
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment)			5. PRESENT POSITION		6. EMPLOYEE EXTENSION
DDP/EUR			Records Admin Officer		a/o7152
7. PROPOSED STATION			8. PROPOSED POSITION (Title, Number, Grade)		
			Records Admin Officer 0699 (09)		
9. TYPE OF COVER AT NEW STATION		10. ESTIMATED DATE OF DEPARTURE		11. NO. OF DEPENDENTS TO ACCOMPANY	
		31 May 1971		-2-	
12. COMMENTS					
<p>Please evaluate for proposed assignment.</p> <p>No language is required for this position</p> <p>Form 58 attached</p>					
13. DATE OF REQUEST		14. OFFICIAL		15. ROOM NUMBER AND BUILDING	
8 March 1971		E/Pers		4B0002 Hq.	
				7152	
17. OFFICE OF MEDICAL SERVICES DISPOSITION					
18. OFFICE OF SECURITY DISPOSITION					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION					
<p>7 APR 1971</p> <p>QUALIFIED FOR OVERSEAS ASSIGNMENT</p> <p>NOV 1 3 50 PM '71</p>					
REQUEST FOR PCS OVERSEAS EVALUATION					

SECRET
(When Filled In)

QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING, TYPE OR PRINT, AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I BIOGRAPHIC AND POSITION DATA

	DO
--	----

SECTION II EDUCATION

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Country)	YEARS ATTENDED (From-To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO
---------------------------	--------------------------------	--------------------------	--

COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/ QTR. HRS. (Specify)
	MAJOR	MINOR				
1. UNIVERSITY OF MARYLAND			1964-1970			248 SEM HRS
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1.				
2.				

SECTION III MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:				
2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)				
3. DATE OF BIRTH	4. PLACE OF BIRTH (City, State, Country)			
5. OCCUPATION	6. PRESENT EMPLOYER			
7. CITIZENSHIP	8. FORMER CITIZENSHIP(S) COUNTRY(IES)		9. DATE U.S. CITIZENSHIP ACQUIRED	

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

	NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1. <input checked="" type="checkbox"/> ADD <input type="checkbox"/> DELETE				American	
2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE					

SECRET
(When Filled In)

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY--CHECK (X)			
				TEST- DANCE	TRAVEL	STUDY	OTHER ASSIGN- MENT
1.		MAR 11 1921 MAR 17					
2.		MAR 11 1921					
SECTION VI TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (PPM)		2. SHORTHAND (PPM)		3. INDICATE SHORTHAND SYSTEM USED--CHECK (X) APPROPRIATE ITEM			
				<input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENO TYPE <input type="checkbox"/> OTHER SPECIFY:			
SECTION VII SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.							
SECTION VIII MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?				2. NEW CLASSIFICATION			
<input type="checkbox"/> YES <input type="checkbox"/> NO							
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4. IF DEFERRED, GIVE REASON			
MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG		<input type="checkbox"/> ARMY <input type="checkbox"/> NAVY		<input type="checkbox"/> MARINE CORPS <input type="checkbox"/> AIR FORCE		<input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> AIR NATIONAL GUARD	
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK		3. EXPIRATION DATE OF CURRENT OBLIGATION			
4. CHECK CURRENT RESERVE CATEGORY				5. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED			
<input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED							
5. MILITARY MODILIZATION ASSIGNMENT							
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		DATE COMPLETED		<input type="checkbox"/> RESIDENT <input type="checkbox"/> AGENCY-SPONSORED	
SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)			DATE OF MEMBERSHIP		
					FROM TO		
1.							
2.							
3.							
SECTION X REMARKS							
DATE		310					
		X					

SECRET

SECRET

(When Filled In)

OFFICIAL USE ONLY (When Filled In)

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS.

SECTION I

BIOGRAPHIC AND POSITION DATA

1 EMP. SER. NO.	2 NAME (Last First Middle)	3 SEX	4 DATE OF BIRTH	5 SCHEDULE/GRADE/STEP
				GS-09-07
6 SD	7 POSITION TITLE	8 OFFICE OF ASSIGNMENT	9 LOCATION (Country, City)	
D	RECORDS ADMIN OF	PE	SAIGON, SOUTH VIET NAM	

SECTION II

AGENCY OVERSEAS SERVICE

AREA	TYPE TOUR	FROM	TO
VIETNAM	PCS 56	94708/01	98/07/01
	TDY 56	96/08/01	98/11/01
	TDY 56	97/02/01	97/08/01
	PCS 56	97/09/01	99/03/19
	PCS 43	61/04/24	66/09/24
	PCS 6	67/01/04	68/10/3

OVERSEAS DATA

COLEJ

16 OCT 1962

DATE:

INITIALS:

SECTION III

EDUCATION

DEGREE	MAJOR FIELD	COLLEGE	YEAR
	NO COLLEGE DEGREE ON RECORD		

FORM
147 4441
MAY 7-67

SECRET

GROUP 1
Excluded from automatic
downgrading and declassification

30 Feb 1970

(451)

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When Filled In

SECTION III							
EDUCATION (Cont'd)							
HIGH SCHOOL							
LAST HIGH SCHOOL ATTENDED	ADDRESS City State Country				YEARS ATTENDED From To	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE OR UNIVERSITY STUDY							
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM TO	DEGREE RECEIVED	YEAR RECEIVED	NO SEM. QTR MOS (Specify)	
	MAJOR	MINOR					
1. U. OF MD.		ENG I	1966			3	
2. U. OF MD.		B. 10	1966			3	
3. U. OF MD. SAIGON		HIS 127	1967			3	
4. U. OF MD. SAIGON		FEN 31	1967			3	
5. U. OF MD. SAIGON		FEN 1	1967			3	
6. IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE, WHEN REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.							
<div style="border: 1px solid black; padding: 5px; width: fit-content;"> <p>CS.</p> <p>CHIEF OF STAFF</p> </div>							
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS							
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS			
1.							
2.							
3.							
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE							
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS			
1.							
2.							
3.							
4.							
5.							
AGENCY-SPONSORED EDUCATION							
<i>Specify which, if any, of the education shown in Section III was Agency sponsored</i>							
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS			
1.							
2.							
3.							
4.							
5.							

SECRET

(When Filled In)

NONE

GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL

SECTION V <u>None</u>		TYPING AND STENOGRAPHIC SKILLS	
1. TYPING (WPM)	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEMS USED - CHECK (X) APPROPRIATE ITEM: <input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER, SPECIFY:	
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE <u>NO</u> OPERATING EXPERIENCE OR TRAINING (calculator, mimeograph, card punch, etc.)			

None

SPECIAL QUALIFICATIONS

SECRET

SECRET

(When Filled In)

SECTION VIII		AGENCY EMPLOYMENT HISTORY	
1. INCLUSIVE DATES (from-to-by month & year)	2. LOCATION (Country, City)	3. DIRECTORATE/OFFICE OR DIVISION/ BRANCH	
APR 67 - DEC 68	241900 VITNAM		
4. TITLE OF JOB		5. GRADES HELD IN JOB	
6. DESCRIPTION OF DUTIES			
1. INCLUSIVE DATES (from-to-by month & year)	2. LOCATION (Country, City)	3. DIRECTORATE/OFFICE OR DIVISION/ BRANCH	
APR 61 - SEPT 66		FE	
4. TITLE OF JOB		5. GRADES HELD IN JOB	
CHIEF OF REGISTRY		GS 9	
6. DESCRIPTION OF DUTIES			
SUPERVISED 7 EMPLOYEES IN REGISTRY WORK.			
1. INCLUSIVE DATES (from-to-by month & year)	2. LOCATION (Country, City)	3. DIRECTORATE/OFFICE OR DIVISION/ BRANCH	
FEB 59 - MAR 61	WASH. D.C.	FE	
4. TITLE OF JOB		5. GRADES HELD IN JOB	
RECORDS ADMIN OFFICER		GS-9	
6. DESCRIPTION OF DUTIES			
ASSIST THE FE RMO IN THE MANAGEMENT OF FE RECORDS. INCLUDED CLOSE LIAISON WITH RID. ALSO INVOLVED 4 MONTHS OF HALF-DAY WORK WITH DDP/MACHINE RECORD GROUP IN SETTING UP THE APERTURE CARD SYSTEM.			

SECRET

SECRET

When Filled In

SECTION VIII		AGENCY EMPLOYMENT HISTORY (Cont'd)	
1. INCLUSIVE DATES (From-To-by month & year)	2. [REDACTED]	3. DIRECTORATE OFFICE OR DIVISION, BRANCH	4. GRADES HELD IN JOB
AUG 57 - FEB 59	[REDACTED]	FE	GS-7 & GS-9
4. TITLE OF JOB		5. GRADES HELD IN JOB	
CHIEF OF RECORDS MANAGEMENT TEAM		GS-7 & GS-9	
6. DESCRIPTION OF DUTIES			
<p>CHIEF OF A TEAM OF THREE INDIVIDUALS WERE STATIONED PCS [REDACTED] but TRAVELLED THROUGHOUT THE F.E. [REDACTED] TO SET UP RECORD SYSTEMS, INCLUDING REGISTRY, ACCORDING TO HEADQUARTERS REGULATION. THIS WAS TO ENSURE THAT FIELD SYSTEMS WOULD BE IN LINE WITH HQS PROCEDURES.</p>			
1. INCLUSIVE DATES (From-To-by month & year)	2. [REDACTED]	3. DIRECTORATE OFFICE OR DIVISION, BRANCH	4. GRADES HELD IN JOB
FEB 57 - JULY 57	[REDACTED]	WH	GS-7
4. TITLE OF JOB		5. GRADES HELD IN JOB	
TEAM MEMBER OF RECORDS MANAGEMENT TEAM		GS-7	
6. DESCRIPTION OF DUTIES			
<p>MEMBER OF A TEAM OF 4 WERE SENT [REDACTED] TO ESTABLISH AND STREAMLINE A SYSTEM OF RECORDS. THIS INVOLVED SETTING UP A 201 SYSTEM, BETTER NAME TRACE SYSTEM, CHARGE-OUT SYSTEM FOR FILES AND THE MICROFILMING OF FBI RECORDS. MY MAIN SPECIALTY WAS 201'S.</p>			
1. INCLUSIVE DATES (From-To-by month & year)	2. [REDACTED]	3. DIRECTORATE OFFICE OR DIVISION, BRANCH	4. GRADES HELD IN JOB
AUG 54 - NOV 56	[REDACTED]	FE	GS-5 & GS-7
4. TITLE OF JOB		5. GRADES HELD IN JOB	
ADMIN ASSISTANT		GS-5 & GS-7	
6. DESCRIPTION OF DUTIES			
<p>NAME TRACES AND OTHER REGULAR REGISTRY DUTIES.</p>			

SECRET

- 6 -

When Pilled In?

MARITAL STATUS

1 RELEASE STATUS (Single Married Widowed Separated Divorced Annulled Remarried SEC 9)

17.2.52 (11-12)

[illegible]

NONE

PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS

[illegible]

CATS

9 OCT 68

49 Nov. 26 (D) 2207 27 28

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(When Filled In)

AP

PERIODIC SUPPLEMENT PERSONAL HISTORY STATEMENT		THIS DATE
Return to		
OAB		
1604 Curie		
<p>INSTRUCTIONS</p> <p>This form provides the means whereby your official personal history statement will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through III in their entirety. You need complete Sections VII through XIII only if there has been a change since you entered on duty with the organization or if you believe the item is more complete, correct, or better than you have previously reported.</p>		
SECTION I		
<div style="position: relative;"> <div style="position: absolute; top: 0; right: 0; font-size: 1.5em; font-weight: bold;">GENERAL</div> </div>		
<div style="display: flex; justify-content: space-between;"> 4791 U.S.A. </div>		
SECTION II		
PERSON TO BE NOTIFIED IN CASE OF EMERGENCY		
<div style="position: relative;"> <div style="position: absolute; top: 0; right: 0; font-size: 1.5em; font-weight: bold;">GENERAL</div> </div>		
<div style="display: flex; justify-content: space-between;"> 4791 NA 1604 </div>		
<p>8. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Spouse, Mother, Father) MAY ALSO BE NOTIFIED. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE.</p> <p style="text-align: center; font-size: 1.5em;">NA</p>		
SECTION III		
MARITAL STATUS		
<p>1. CHECK (X) ONE: <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> ANNULLED</p>		
<p>2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS</p> <p style="text-align: right; font-size: 1.2em;">32 SEP 70</p>		
<p>WIFE OR HUSBAND: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving data below for all previous marriages. If marriage is contemplated, provide same data for fiancée.</p>		
<p>3. NAME (First) (Middle) (maiden) (Last)</p>		
<p>4. DATE OF MARRIAGE 5. PLACE OF MARRIAGE (City, State, Country)</p>		
<p>6. HIS (or HER) ADDRESS BEFORE MARRIAGE (No., Street, City, State, Country)</p>		
<p>7. LIVING 8. DATE OF DEATH 9. CAUSE OF DEATH</p>		
<p>10. CURRENT ADDRESS (Give date address, if deceased)</p>		
<p>11. DATE OF BIRTH 12. PLACE OF BIRTH (City, State, Country)</p>		
<p>13. IF BORN OUTSIDE U.S. DATE OF ENTRY 14. PLACE OF ENTRY</p>		
<p>15. CITIZENSHIP (Country) 16. DATE ACQUIRED 17. WHERE ACQUIRED (City, State, Country)</p>		
<p>18. OCCUPATION 19. PRESENT EMPLOYER (Also give former employer, or if school or university of unemployed, last two employers)</p>		
<p>20. EMPLOYER'S OR OWN HOME ADDRESS (No., Street, City, State, Country)</p>		

SECTIONS III CONTINUED TO PAGE 2

SECRET
(When Filled In)

SECTION III CONTINUED FROM PAGE 1

21. DATES OF MILITARY SERVICE (From- and To-) BY MONTH AND YEAR

22. BRANCH OF SERVICE

23. COUNTRY WITH WHICH MILITARY SERVICE AFFILIATED

24. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN

SECTION IV RELATIVES BY BLOOD, MARRIAGE OR ADOPTION LIVING ABROAD OR WHO ARE NOT U.S. CITIZENS

1.	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
1	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
2	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
2	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
3	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
3	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
4	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
4	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT

5. SPECIAL REMARKS, IF ANY, CONCERNING THESE RELATIVES

NA

SECTION V FINANCIAL STATUS

1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? ☒ YES ☐ NO

2. IF YOUR ANSWER IS "NO" TO THE ABOVE, STATE SOURCES OF OTHER INCOME

NA

3. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS

NAME OF INSTITUTION	ADDRESS (City, State, Country)
	Washington, D.C.

SECTION V CONTINUED TO PAGE 3

SECRET

SECRET

(When Filled In)

SECTION V CONTINUED FROM PAGE 2

4. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? ☐ YES ☒ NO

5. IF YOUR ANSWER IS "YES" TO THE ABOVE QUESTION, GIVE PARTICULARS, INCLUDING COURT AND DATE(S)
NA

6. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION, OR COMPENSATION FOR MILITARY OR NAVAL SERVICE? ☐ YES ☒ NO

7. IF YOUR ANSWER IS "YES" TO THE ABOVE QUESTION, GIVE COMPLETE DETAILS
NA

8. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTION WITH, NON-U.S. CORPORATIONS OR BUSINESSES OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS? ☐ YES ☒ NO IF YOU HAVE ANSWERED "YES", GIVE COMPLETE DETAILS ON A SEPARATE SHEET AND ATTACH IN A SEALED ENVELOPE.

SECTION VI CITIZENSHIP

1. PRESENT CITIZENSHIP (COUNTRY)
U.S.A.

2. CITIZENSHIP ACQUIRED BY - CHECK (X) ONE:
☒ BIRTH ☐ MARRIAGE ☐ OTHER (Specify):

3. HAVE YOU TAKEN STEPS TO CHANGE YOUR PRESENT CITIZENSHIP? ☐ YES ☒ NO

4. GIVE PARTICULARS
NA

5. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, INDICATE PRESENT STATUS OF YOUR APPLICATION (First papers, etc.)
NA

SECTION VII EDUCATION

1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED

<input type="checkbox"/> LESS THAN HIGH SCHOOL GRADUATE	<input type="checkbox"/> OVER TWO YEARS OF COLLEGE - NO DEGREE
<input type="checkbox"/> HIGH SCHOOL GRADUATE	<input type="checkbox"/> BACHELOR'S DEGREE
<input checked="" type="checkbox"/> TRADE, BUSINESS, OR COMMERCIAL SCHOOL GRADUATE	<input type="checkbox"/> GRADUATE STUDY LEADING TO HIGHER DEGREE
<input type="checkbox"/> TWO YEARS COLLEGE OR LESS	<input type="checkbox"/> MASTER'S DEGREE <input type="checkbox"/> DOCTOR'S DEGREE

2. COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		DATES ATTENDED		DEGREE REC'D	DATE REC'D	SEM/STR. HOURS SPECIFY
	MAJOR	MINOR	FROM	TO			
NA	NA						

3. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL MONTHS
		FROM	TO	
HADLICK'S PRIVATE	ACCOUNTING	NOV-48	APR-49	9 MONTHS
BUSINESS SCHOOL GRAND FORKS, N.DAK.		OCT-49	FEB-50	
4. MILITARY TRAINING (Full time duty in specialized schools such as Ordnance, Intelligence, Communications, etc.)				
NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL MONTHS
		FROM	TO	
NA				

5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE
NA

SECRET

When Filled in;

FOREIGN LANGUAGE ABILITIES

2. IF YOU HAVE CHECKED "ACADEMIC STUDIES" OR "NOT ACQUIRED", INDICATE LENGTH AND INTENSIVENESS OF STUDY

3. DESCRIBE YOUR ABILITY TO DO SPECIALIZED LANGUAGE WORK INVOLVING VOCABULARIES AND TERMINOLOGY ON THE SCIENTIFIC, ENGINEERING, TELECOMMUNICATIONS, MILITARY OR ANY OTHER SPECIALIZED FIELD

GEOGRAPHIC AREA KNOWLEDGE

2. INDICATE THE PURPOSE OF VISIT, RESIDENCE OR TRAVEL FOR EACH OF THE REGIONS OR COUNTRIES LISTED ABOVE

NA

TYPING AND STENOGRAPHIC SKILLS

SECTION XI SPECIAL QUALIFICATIONS	
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.	
N/A	
2. INDICATE ANY SPECIAL QUALIFICATIONS, RESULTING FROM EXPERIENCE OR TRAINING, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION OR TYPE OF WORK.	
N/A	
3. EXCLUDING EQUIPMENT NOTED IN SECTION 1, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT OR MACHINES SUCH AS OPERATION OF SHORTRANGE RADIO, MULTILITH, TURRET LATHE, SCIENTIFIC AND PROFESSIONAL DEVICES, ETC.	
N/A	
4. IF YOU ARE A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (Pilot, Electrician, Radar Operator, Teacher, Lawyer, CPA, Medical Technician, etc.), INDICATE THE KIND OF LICENSE OR CERTIFICATE, NAME OF ISSUING STATE, AND REGISTRY NUMBER, IF KNOWN.	
N/A	
5. FIRST LICENSE OR CERTIFICATE (Year of issue)	6. LATEST LICENSE OR CERTIFICATE (Year of issue)
N/A	N/A

SECRET

SECRET
(When Filled In)

SECTION XI CONTINUED FROM PAGE 4

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not submit copies unless requested). INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-fiction, scientific articles, general interest, subjects, novels, short stories, etc.)

NA

8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED

NA

9. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

NA

10. LIST ANY PROFESSIONAL, ACADEMIC OR HONORARY ASSOCIATIONS OR SOCIETIES IN WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER. LIST ACADEMIC HONORS YOU HAVE RECEIVED.

NA

SECTION XII ORGANIZATION WORK EXPERIENCE - SINCE LAST COMPLETION OF A PERSONNEL QUALIFICATIONS QUESTIONNAIRE

1. INCLUSIVE DATES (From and To) 2. GRADE 3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT

APR 1952 - JUNE 1954 4 R1

4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION 5. OFFICIAL POSITION TITLE

NONE

FILE CLERK

6. DESCRIPTION OF DUTIES

WORKED IN FILES DOING FILING AND OTHER RELATED DUTIES.

WORKED IN CONSOLIDATION WITH 201'S

1. INCLUSIVE DATES (From and To) 2. GRADE 3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT

JULY 54 - JUNE 56 5 FE/6 OVERSEAS

4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION 5. OFFICIAL POSITION TITLE

NONE

ADMIN INTELL ANALYST

6. DESCRIPTION OF DUTIES

HEAD OF PERSONALITY FILE (201 FILES) SECTION FOR BASE, WHICH INCLUDED ALL AGENT FILES.

1. INCLUSIVE DATES (From and To) 2. GRADE 3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT

AUG 56 - NOV 56 7 R1 ADMIN TDY OVERSEAS

4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION 5. OFFICIAL POSITION TITLE

5

INTELL ANALYST

6. DESCRIPTION OF DUTIES

RETIREMENT OF RECORDS TO Hqs FROM BASE.

SET UP ^{NEW} SYSTEM OF RECORDS FOR BASE

1. INCLUSIVE DATES (From and To) 2. GRADE 3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT

DEC 56 - JAN 57 7 R1

4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION 5. OFFICIAL POSITION TITLE

NONE

INTELL ANALYST

6. DESCRIPTION OF DUTIES

WORKED IN RI/AN 201 SECTION IN FILLING OUT 831'S

1. INCLUSIVE DATES (From and To) 2. GRADE 3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT

FEB 57 - AUG 57 7 R1 TDY

4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION 5. OFFICIAL POSITION TITLE

NONE

INTELL ANALYST

6. DESCRIPTION OF DUTIES

SET UP SYSTEM OF RECORDS FOR STATION

(Use additional pages if required)

SECRET

SECRET

(When Filled In)

SECTION XIII		CHILDREN AND OTHER DEPENDENTS				
1. NUMBER OF CHILDREN (including stepchildren and adopted children) WHO ARE UNMARRIED, UNDER 21 YEARS OF AGE, AND ARE NOT SELF-SUPPORTING.		2. NUMBER OF OTHER DEPENDENTS (including spouse, parents, stepparents, sister, etc.) WHO DEPEND ON YOU FOR AT LEAST 50% OF THEIR SUPPORT, OR, CHILDREN OVER 21 YEARS OF AGE WHO ARE NOT SELF-SUPPORTING.				
3. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS						
NAME	RELATIONSHIP	YEAR OF BIRTH	SEX		CITIZENSHIP	ADDRESS
			M	F		

ADDITIONAL COMMENT AND/OR CONTINUATION OF PRECEDING ITEMS.

Can't recall addresses but lived in the following places since Apr 1952 -

Comm. Ave. N.W. D.C.

Minnesota Ave. S.E. D.C.

Colonial Terrace, ~~Washington~~ Arlington, VA.

Greenbrier St, Arlington, VA.

DATE COMPLETED *10 Sept 57* SIGNATURE OF EMPLOYEE *James S. Woods*

SECRET

SECRET
(When Filled In)

LANGUAGE DATA RECORD				
PART I-GENERAL				
1. NAME (Last-First-Middle)		(17-24)		2. DATE OF BIRTH (25-30)
3. LANGUAGE (31-33)	4. TODAY'S DATE (34-39)		5. <input checked="" type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
oao	MONTH 9	DAY 9	YEAR 57	
PART II-LANGUAGE ELEMENTS				
SECTION A. Reading (40)				
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.				
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.				
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.				
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.				
5. I HAVE NO READING ABILITY IN THE LANGUAGE.				
SECTION B. Writing (41)				
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.				
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.				
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.				
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.				
5. I CANNOT WRITE IN THE LANGUAGE.				
SECTION C. Pronunciation (42)				
1. MY PRONUNCIATION IS NATIVE.				
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.				
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN; BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.				
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.				
5. I HAVE NO SKILL IN PRONUNCIATION.				
CONTINUE ON REVERSE SIDE				

CONTINUATION OF PART II-LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E.

Understanding (44)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKE AND PUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV-CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 29-112, PAR. 1C(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT INDEPENDENT OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED

9 Sep 57

SIGN

144)

APPLICATION FOR FEDERAL EMPLOYMENT

INSTRUCTIONS: In order to prevent delay in consideration of your application, answer every question on this form clearly and completely. Type or print in INK. In applying for a specific United States Civil Service examination, read the examination announcement carefully and follow all directions. If you are applying for a WRITING examination, follow the

instructions on the admission card regarding disposition of this application. If you are applying for an UNWRITTEN examination, mail the application to the office named in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.

<p>NAME OF EXAMINATION OR KIND OF POSITION APPLIED FOR</p> <p style="text-align: center;">Accountant</p> <p><small>OPTIONAL (if mentioned in examination announcement)</small></p> <p>1. PLACE OF EXAMINATION (City and State) 2. DATE OF THIS APPLICATION</p> <p style="text-align: center;">Washington D.C. (Last)</p> <p>3. LEGAL OR VOTING RESIDENCE (State) 4. OFFICE PHONE 5. HOME PHONE</p> <p style="text-align: center;">N. Dak. ex 8400 at 2612 AD 8430</p> <p>6. DATE OF BIRTH (month, day, year) 7. MARRIED 8. SINGLE</p> <p style="text-align: center;">(b) WEIGHT. 156 POUNDS</p> <p>9. SEX 10. HEIGHT</p> <p style="text-align: center;">MALE 5 FEET 6 INCHES</p> <p>11. (a) HAVE YOU EVER BEEN EMPLOYED BY THE FEDERAL GOVERNMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>(b) IF SO, GIVE LAST GRADE AND DATE OF LAST CHANGE IN GRADE</p> <p style="text-align: center;">GS-2</p> <p>12. (a) WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? \$ 2950 PER YEAR</p> <p>(b) CHECK IF YOU WILL ACCEPT SHORT-TERM APPOINTMENT IF OFFERED, FOR</p> <p><input type="checkbox"/> 1 TO 3 MONTHS <input type="checkbox"/> 3 TO 6 MONTHS <input checked="" type="checkbox"/> 6 TO 12 MONTHS</p> <p><small>NOTE: Acceptance or refusal of a temporary short-term appointment will not affect your opportunity to obtain a probational appointment.</small></p> <p>(c) IF YOU ARE WILLING TO TRAVEL, SPECIFY</p> <p><input type="checkbox"/> OCCASIONALLY <input checked="" type="checkbox"/> FREQUENTLY <input type="checkbox"/> CONSTANTLY</p>		<p style="text-align: center;">DO NOT WRITE IN THIS BLOCK For Use of Civil Service Commission Only</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;"><input type="checkbox"/> APPROVED</td> <td style="width: 33%;"><input type="checkbox"/> MATERIAL SUBMITTED</td> <td style="width: 33%;"><input type="checkbox"/> ENTERED REGISTER</td> </tr> <tr> <td><input type="checkbox"/> WITH APPROVAL</td> <td><input type="checkbox"/> RETURNED</td> <td></td> </tr> </table> <p>INITIALS AND DATE</p> <p>APPROVED:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>OPTION</th> <th>GRADE</th> <th>EARNED RATING</th> <th>PREFER. RENCE</th> <th>AUGM. RATING</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> 1 POINTS (TEST.)</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> 10 POINTS</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> WIFE OR WIDOW</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> DISAB.</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> DYING INVESTIGATED</td> <td></td> </tr> </tbody> </table>		<input type="checkbox"/> APPROVED	<input type="checkbox"/> MATERIAL SUBMITTED	<input type="checkbox"/> ENTERED REGISTER	<input type="checkbox"/> WITH APPROVAL	<input type="checkbox"/> RETURNED		OPTION	GRADE	EARNED RATING	PREFER. RENCE	AUGM. RATING				<input type="checkbox"/> 1 POINTS (TEST.)					<input type="checkbox"/> 10 POINTS					<input type="checkbox"/> WIFE OR WIDOW					<input type="checkbox"/> DISAB.					<input type="checkbox"/> DYING INVESTIGATED					
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<p>13. EXPERIENCE It is important for you to furnish all information requested below in sufficient detail to enable the Civil Service Commission and the appointing agency to give you full credit in determining your qualifications. Use a separate block for each position. Start with your present position and work back, explaining clearly the principal tasks which you performed in each position, accounting for all periods of unemployment. Experience gained more than 15 years ago which is not pertinent to the work for which you are applying may be summarized in one or more of the blocks. If your duties changed materially while working for the same employer, use a separate block to describe each position. You may include any pertinent religious, civic, welfare, or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Military experience should be described in the spaces below in its proper sequence.</p> <p>(a) If you were ever employed in any position under a name different from that shown in item 3 of this application, give under "Description of your work" for each position, the name used.</p> <p>(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."</p>																																											
<p style="text-align: center;">PRESENT POSITION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DATE OF EMPLOYMENT (month, year)</td> <td style="width: 25%;">EXACT TITLE OF YOUR PRESENT POSITION</td> <td style="width: 25%;">CLASSIFICATION GRADE (if in Federal Service)</td> <td style="width: 25%;">SALARY OR EARNINGS</td> </tr> <tr> <td>May, 1950 TO PRESENT TIME</td> <td>clerk</td> <td>GS-2</td> <td>STARTING \$ 2450 PER YEAR</td> </tr> <tr> <td>PLACE OF EMPLOYMENT (city and State)</td> <td colspan="3">NAME AND TITLE OF IMMEDIATE SUPERVISOR</td> </tr> <tr> <td>Washington D.C.</td> <td colspan="3"></td> </tr> <tr> <td colspan="2">NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)</td> <td colspan="2">NAME AND ADDRESS OF ORGANIZATION (e. g., wholesale club, insurance agency, manufacture of locks, etc.)</td> </tr> <tr> <td colspan="2">Treasury Dept., Penn. Ave.</td> <td colspan="2">Division of Disbursements</td> </tr> <tr> <td colspan="2">NUMBER AND KIND OF EMPLOYERS SUPERVISED BY YOU</td> <td colspan="2">REASON FOR DESIRING TO CHANGE EMPLOYMENT</td> </tr> <tr> <td colspan="2"></td> <td colspan="2">Better Position</td> </tr> <tr> <td colspan="4">SUMMARY OF YOUR WORK</td> </tr> <tr> <td colspan="4">Working with vouchers and checks; checking them for names, dates, money, etc. Doing other clerical duties of a general nature.</td> </tr> </table>				DATE OF EMPLOYMENT (month, year)	EXACT TITLE OF YOUR PRESENT POSITION	CLASSIFICATION GRADE (if in Federal Service)	SALARY OR EARNINGS	May, 1950 TO PRESENT TIME	clerk	GS-2	STARTING \$ 2450 PER YEAR	PLACE OF EMPLOYMENT (city and State)	NAME AND TITLE OF IMMEDIATE SUPERVISOR			Washington D.C.				NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)		NAME AND ADDRESS OF ORGANIZATION (e. g., wholesale club, insurance agency, manufacture of locks, etc.)		Treasury Dept., Penn. Ave.		Division of Disbursements		NUMBER AND KIND OF EMPLOYERS SUPERVISED BY YOU		REASON FOR DESIRING TO CHANGE EMPLOYMENT				Better Position		SUMMARY OF YOUR WORK				Working with vouchers and checks; checking them for names, dates, money, etc. Doing other clerical duties of a general nature.			
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(CONTINUED ON NEXT PAGE)

16-53548-1

18-55200-1

IS CONTINUED

② DATES OF EMPLOYMENT (month, year) FROM Feb, 1950 to May, 1950

EXACT TITLE OF YOUR POSITION Clerk & Salesman

CLASSIFICATION GRADE (if in Federal service) SALARY OR EARNINGS STARTING \$ 180 PER month

PLACE OF EMPLOYMENT (city and State) Grand Forks, N. Dak.

NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division) General Tobacco & Candy Company Grand Forks, N. Dak.

KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale store, insurance agency, manufacture of locks, etc.) Wholesaler of Tobacco & Candy

NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU None

REASON FOR LEAVING To work for the Government

DESCRIPTION OF YOUR WORK

Selling tobacco and candy. Doing office work such as taking inventories and making out sales tickets.

③ DATES OF EMPLOYMENT (month, year) FROM Oct, 1949 to Feb, 1950

EXACT TITLE OF YOUR POSITION In school

CLASSIFICATION GRADE (if in Federal service) SALARY OR EARNINGS STARTING \$ PER PER

PLACE OF EMPLOYMENT (city and State)

NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)

KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale store, insurance agency, manufacture of locks, etc.)

NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU

REASON FOR LEAVING

DESCRIPTION OF YOUR WORK

④ DATES OF EMPLOYMENT (month, year) FROM April, 1949 to Oct, 1949

EXACT TITLE OF YOUR POSITION Farm Laborer

CLASSIFICATION GRADE (if in Federal service) SALARY OR EARNINGS STARTING \$ 150 PER month

PLACE OF EMPLOYMENT (city and State) Inkster, N. Dak.

NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)

KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale store, insurance agency, manufacture of locks, etc.) Farming

NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU none

REASON FOR LEAVING To go to school

DESCRIPTION OF YOUR WORK

Doing general farm duties.

[illegible]

26 REFERENCES List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Item 18 (EXPERIENCE).

FULL NAME _____ (Give complete current address, including street and number) _____ BUSINESS OR OCCUPATION _____

Teacher
Teacher
Teacher

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN

25. MAY INQUIRY BE MADE OF YOUR PRESENT EMPLOYER REGARDING YOUR CHARACTER, QUALIFICATIONS, ETC?	YES	NO	25. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? If your answer is "Yes," give details in Item 35	YES	NO
26. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X		26. DOES THE UNITED STATES GOVERNMENT EMPLOY IN A CIVILIAN CAPACITY ANY RELATIVE OF YOURS BY BLOOD OR MARRIAGE WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? If your answer is "Yes," show in Item 36 for EACH such relative (1) full name, (2) present address, (3) relationship, (4) Department or Agency by which employed, and (5) kind of appointment		X
27. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF THE COMMUNIST PARTY U.S.A. OR ANY COMMUNIST ORGANIZATION?	X		SPECIAL INSTRUCTIONS FOR CLAIMING VETERAN PREFERENCE A. If you are claiming preference as a PEACETIME VETERAN who has been awarded a campaign badge or service ribbon, or as a DISABLED VETERAN, or as the WIFE OF A DISABLED VETERAN, or as the WIDOW OF A WAR OR CAMPAIGN VETERAN, attach Veteran Preference Claim, CSC Form 16, together with proof specified therein. B. If you are a WAR-TIME VETERAN not claiming disability preference, you should NOT submit your discharge with this application. Preference will be tentatively credited to you and if appointed, you will be required to submit to the appointing officer prior to entry on duty, official evidence of separation from active service in the armed forces of the United States in time of war.		
28. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF A FASCIST ORGANIZATION?	X		37. (A) WERE YOU EVER IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING TIME OF WAR?	YES	NO
29. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH ADVOCATES THE OVERTHROW OF OR A CONSTITUTIONAL FORM OF GOVERNMENT, OR OF AN ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH HAS ADOPTED A POLICY OF ADVOCATING OR APPROVING THE COMMISSION OF ACTS OF FORCE OR VIOLENCE TO DEPRIVE OTHER PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES OR OF SEEKING TO ALTER THE FORM OF GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTIONAL MEANS?	X		(B) IS THE WORD "HONORABLE" OR THE WORD "SATISFACTORY" USED IN YOUR DISCHARGE OR SEPARATION PAPERS TO SHOW THE TYPE OF YOUR DISCHARGE OR SEPARATION?	X	
If your answer to question 27, 28, or 29 above is "yes," state in Item 39 the names of all such organizations, associations, movements, groups, combinations or combinations of persons of which you were a member. Give complete details of your activities therein and make any explanation you desire regarding your membership or activities therein		X	(C) WAS SERVICE PERFORMED ON AN ACTIVE FULL-TIME BASIS, WITH FULL MILITARY PAY AND ALLOWANCES?	X	
30. SINCE YOUR 18TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED, OR IMPRISONED OR PLACED ON PROBATION OR HAVE YOU EVER BEEN OBLIGED TO PAY A FINE OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE EXCEEDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$25 OR LESS WAS IMPOSED?		X	DATE OF ENTRY ON SERVICE: Oct 1946 DATE OF SEPARATION OR SEPARATIONS: April 1948 GRADE OR GRADES: August 1951 STATE NO. (if none, give grade or rating at time of separation): ER 17 214 704 ARMY		
If your answer is "Yes," list all such cases under Item 39 below. Give in each case (1) the date, (2) the nature of the offense or violation, (3) the name and location of the court, (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken		X	38. (A) IF YOU SERVED IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING PEACETIME ONLY, DO YOU PARTICIPATE IN A CAMPAIGN OR EXPEDITION AND RECEIVE A CAMPAIGN BADGE OR SERVICE RIBBON?		X
31. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? If your answer is "Yes," give in Item 39 the name and address of employer, date, and reason in each case		X	(B) ARE YOU A DISABLED VETERAN? If yes, and you have not listed your disability in answer to Item 33, explain in Item 39 below		X
32. HAVE YOU EVER BEEN BARRED BY THE U.S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS? If your answer is "Yes," give dates of and reasons for such barment in Item 39		X	(C) ARE YOU A VETERAN'S WIDOW WHO HAS NOT REMARRIED?		X
33. HAVE YOU ANY PHYSICAL HANDICAP, DISEASE OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? If your answer is "Yes," give complete details in Item 39 so that consideration can be given to your physical fitness for the job		X	(D) ARE YOU THE WIFE OF A VETERAN WHO HAS A SERVICE CONNECTED DISABILITY WHICH ENTITLES HIM TO SPECIAL SEVERE EMPLOYMENT?		X
34. (A) DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES GOVERNMENT OR FROM A GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPARABLE FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes," give complete details in Item 39		X	THIS SPACE FOR USE OF APPOINTING OFFICER ONLY The information contained in the answers to Question 37 above has been verified by comparison with the discharge certificate on _____ 10 _____ Agent _____ Time _____		

39. STATE THE DETAILED ANSWERS TO QUESTIONS 25 TO 33 (Indicate item numbers to which answers apply)

25. _____
26. _____
27. _____
28. _____
29. _____
30. _____
31. _____
32. _____
33. _____

If more space is required, use space on back of this page. Write on each sheet your name, address, date of birth, and exact birth date. Attach to back of this page.

Before signing this application check it over to make sure that you have answered ALL questions correctly.

I CERTIFY that the statements made by me in this application are true and correct, and are made in good faith.

False statement on this application is punishable by Law (U.S. Code, Title 18, Section 50)

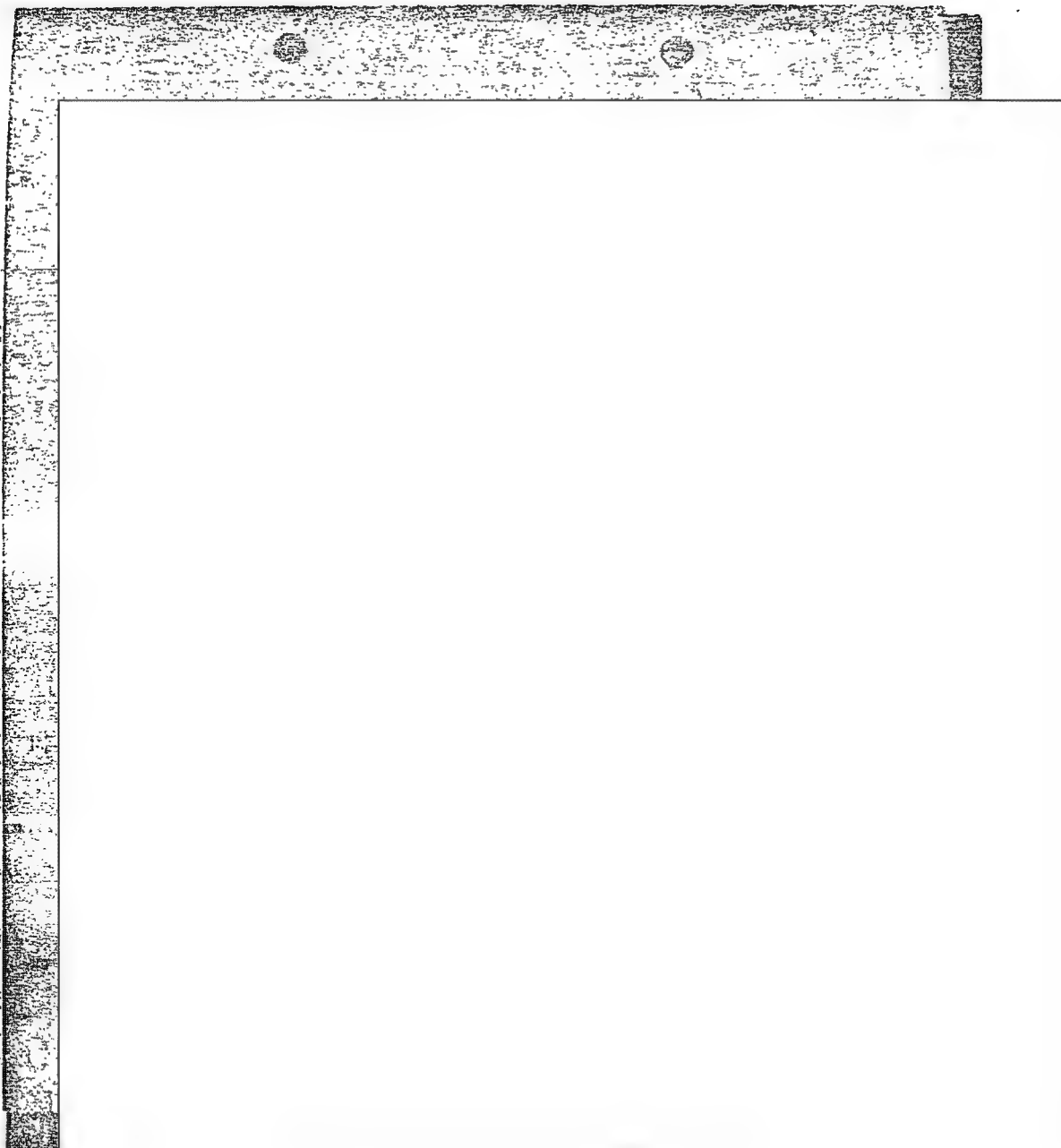
SIGNATURE OF APPLICANT _____

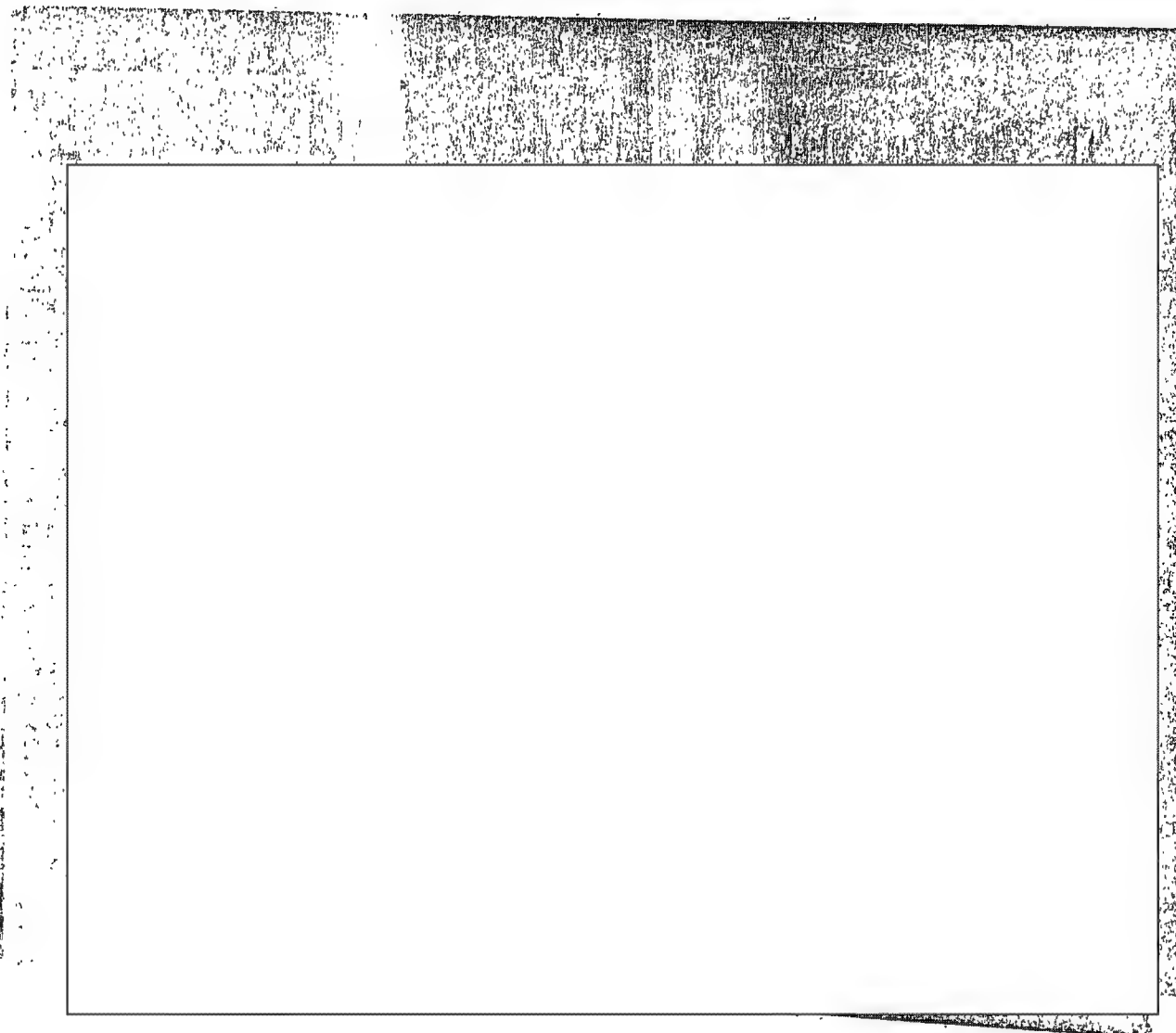
PERSONAL HISTORY STATEMENT

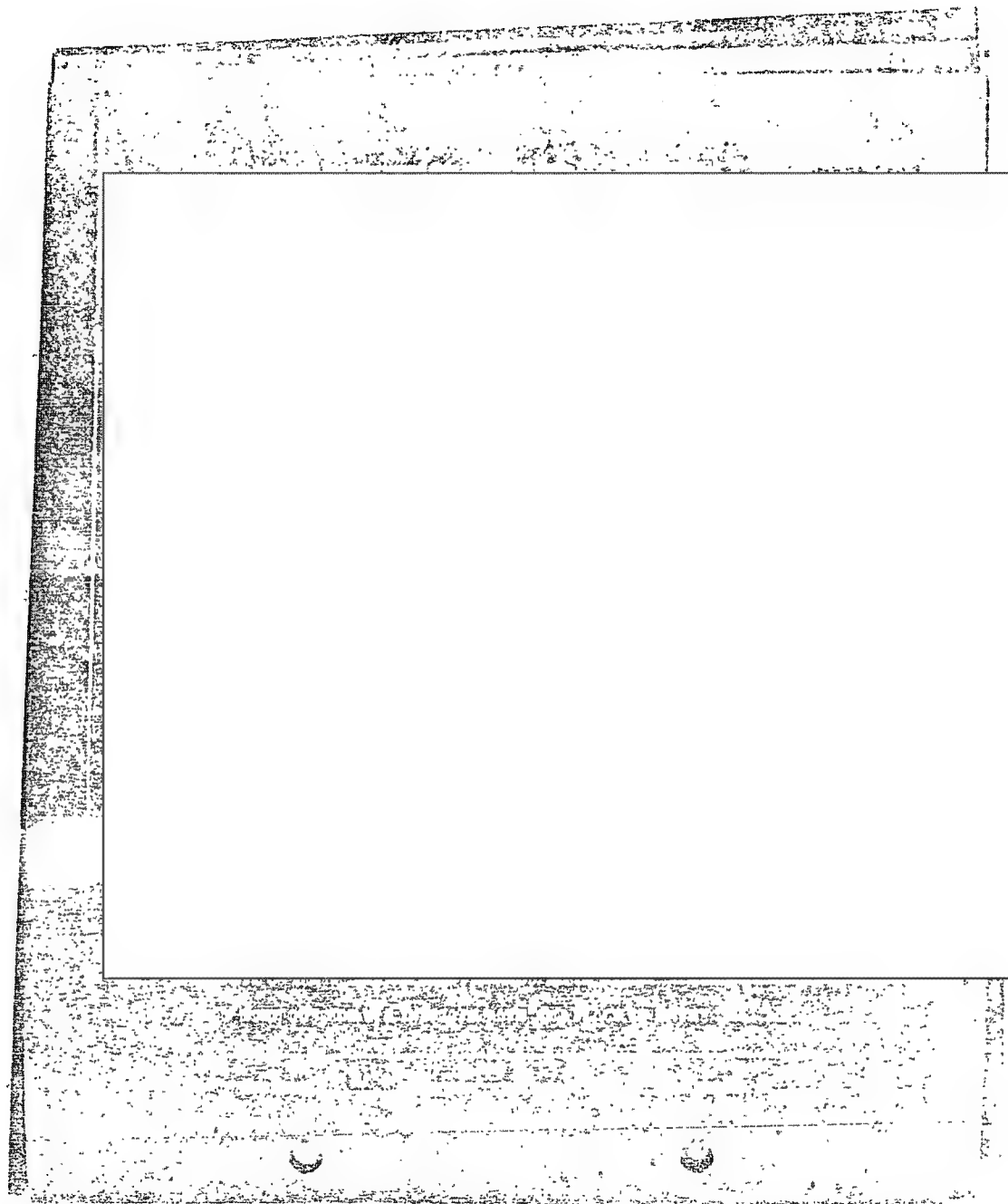
1008

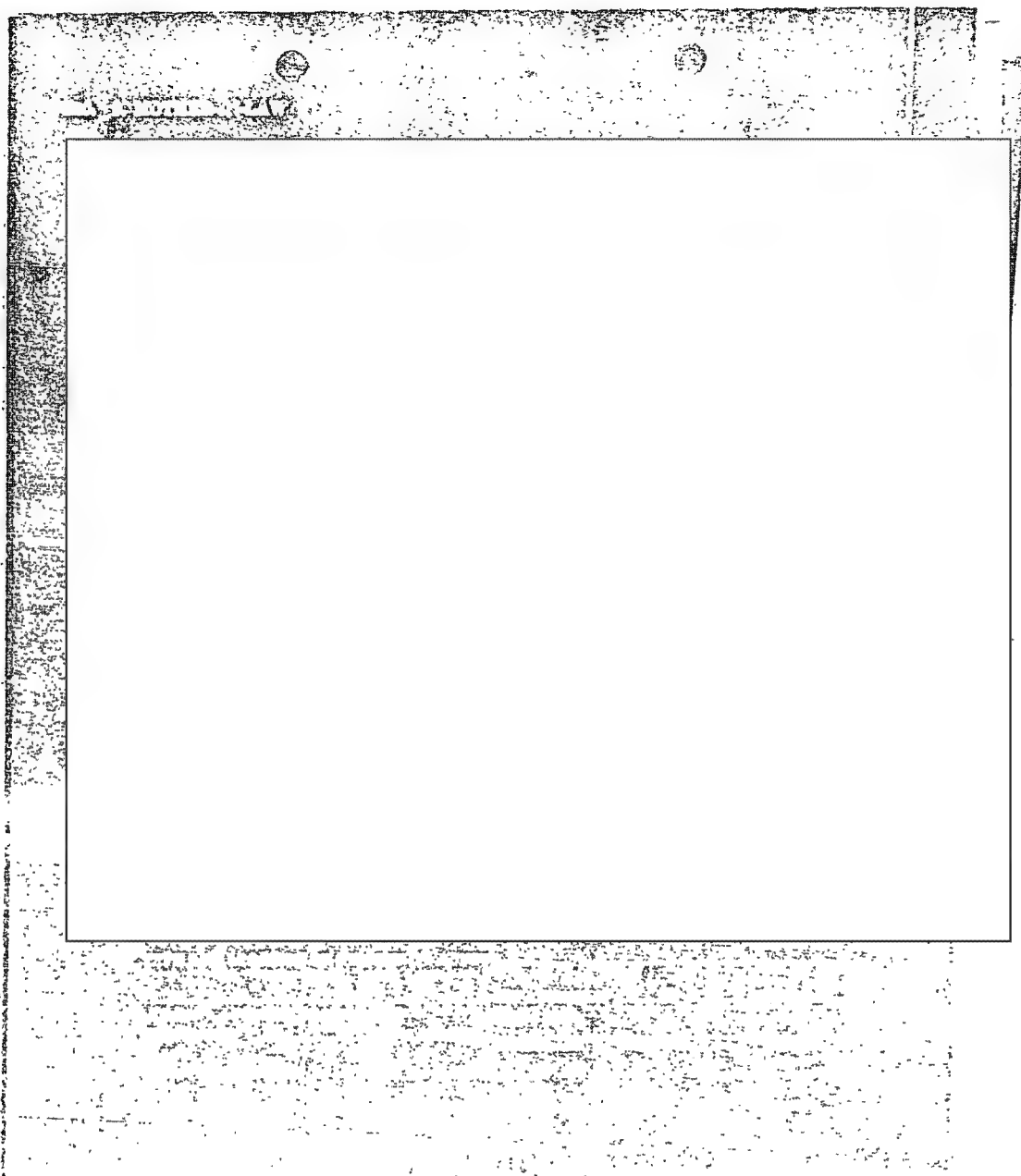
1. Answer all questions completely. If a question is not verifiable with you, write "unknown" only if you do not know the answer and cannot obtain the answer from anyone's records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient space.
2. Type, print, or write carefully. Illegible or incomplete forms will not receive further credit.

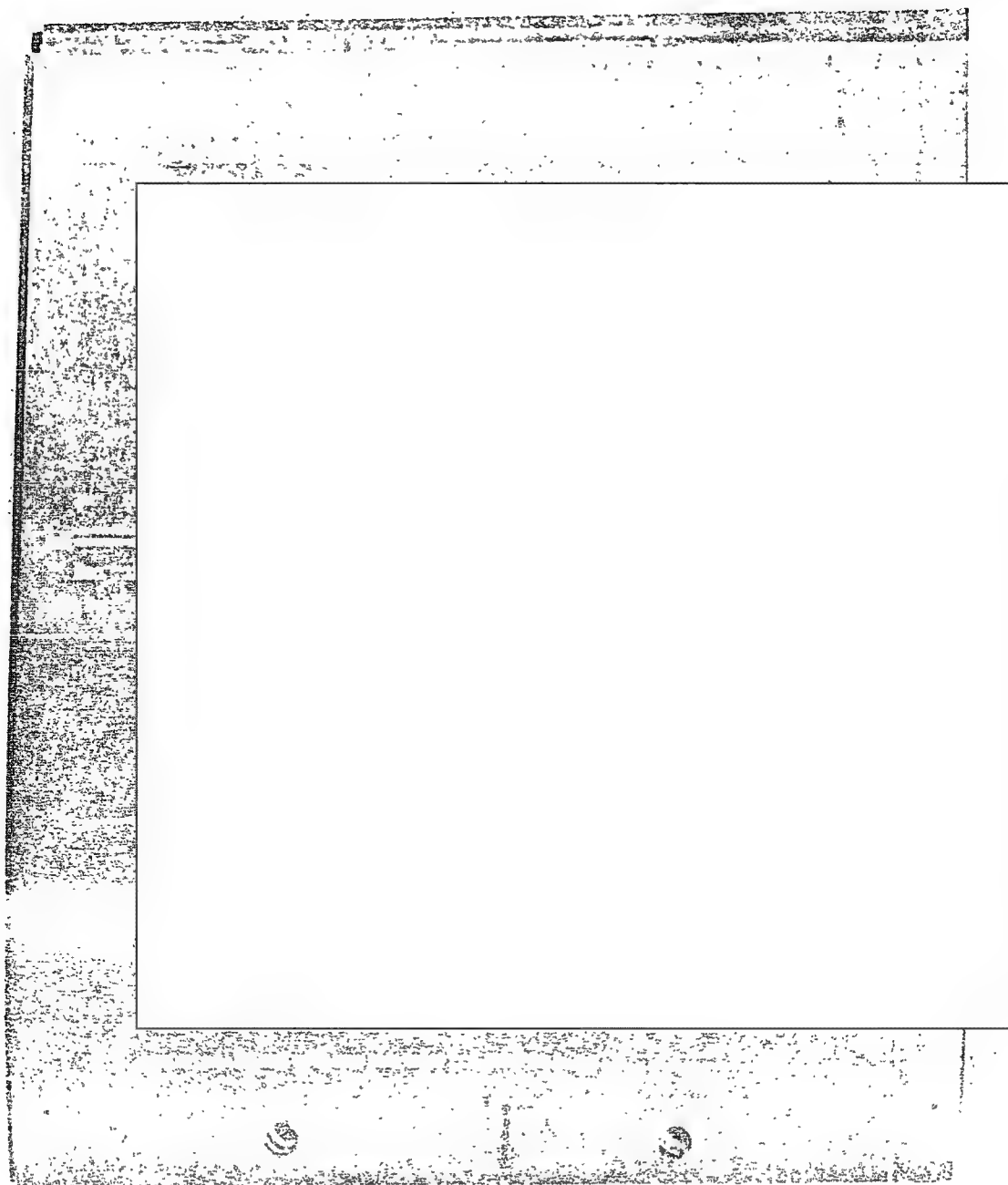
HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS?

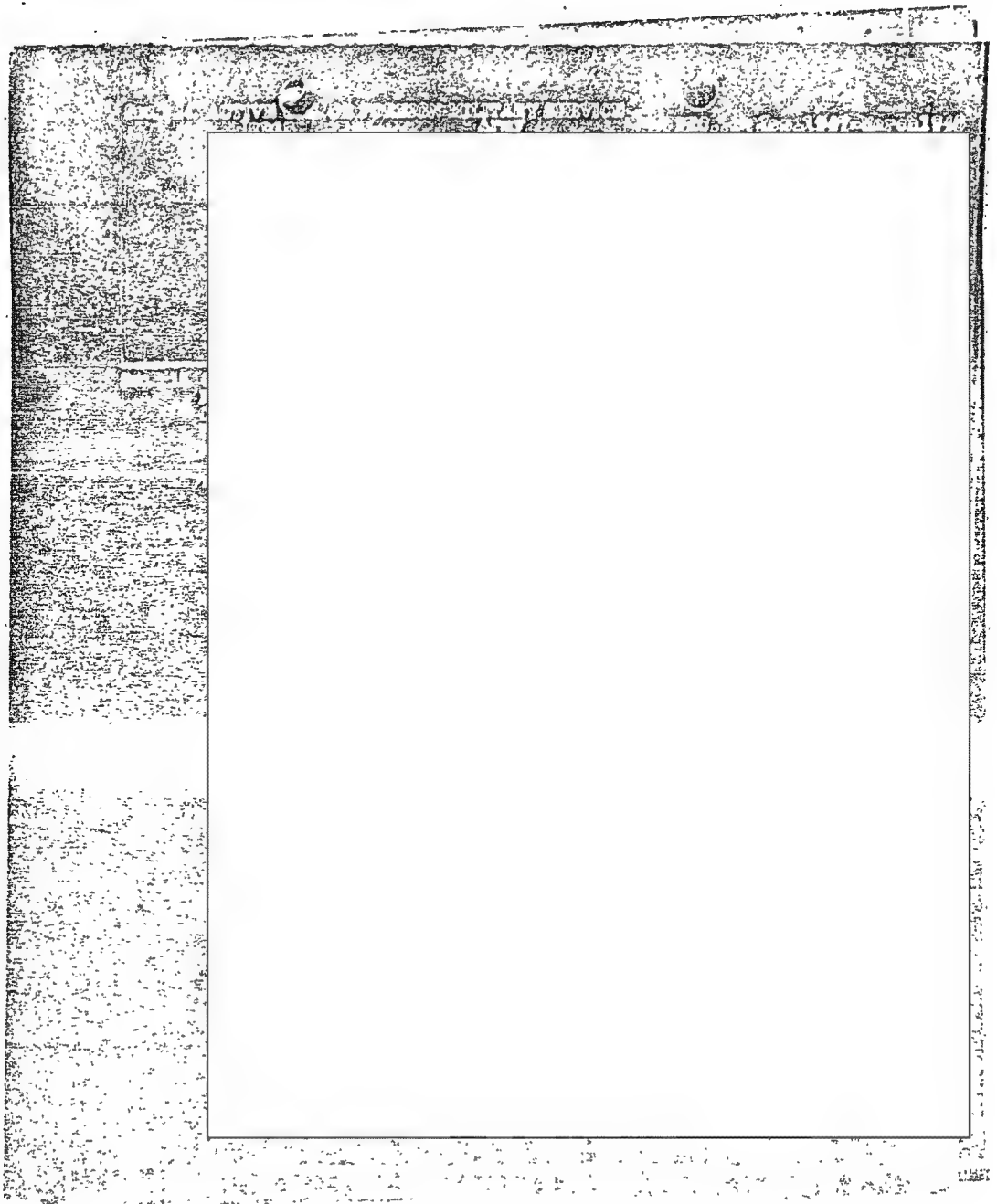


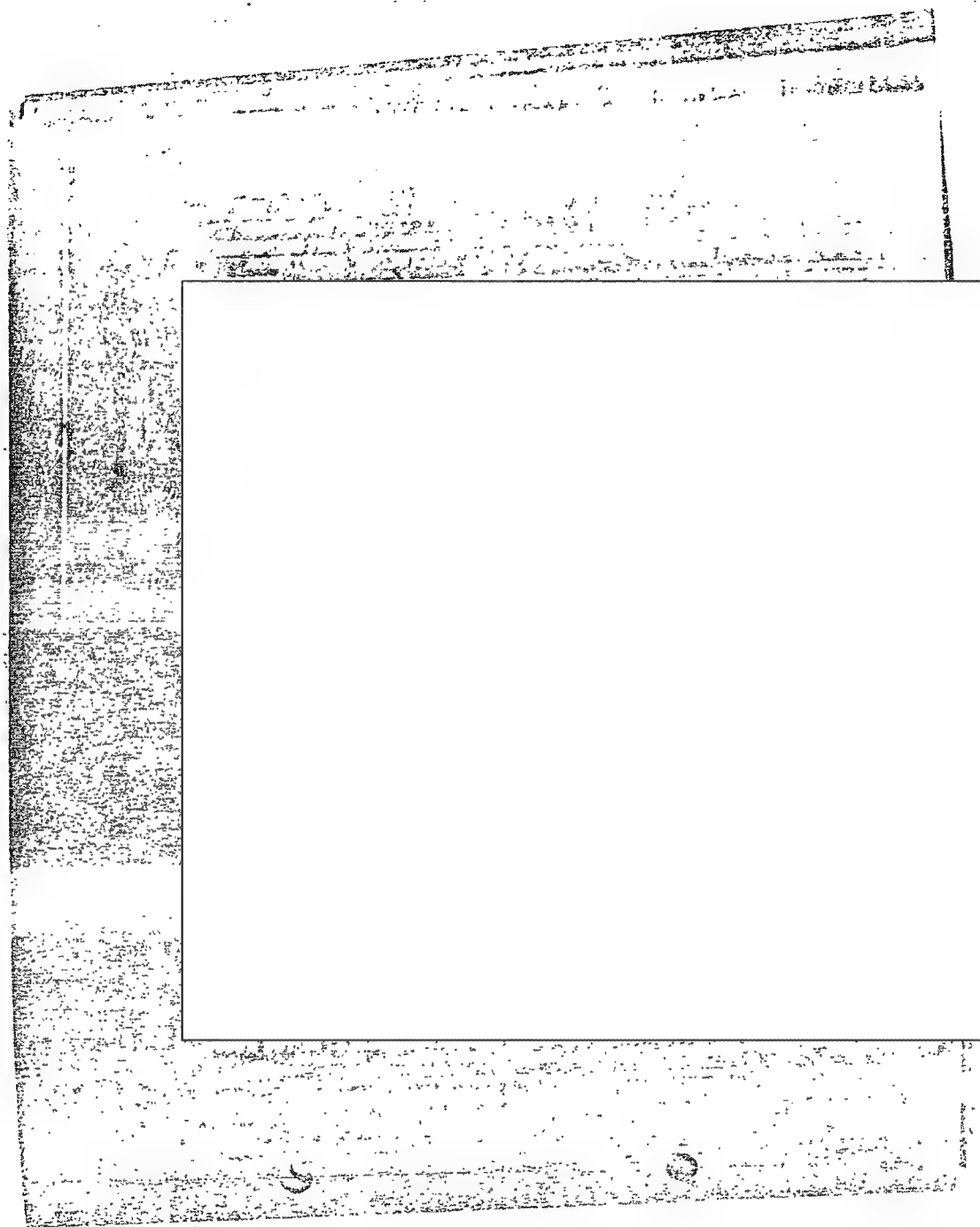


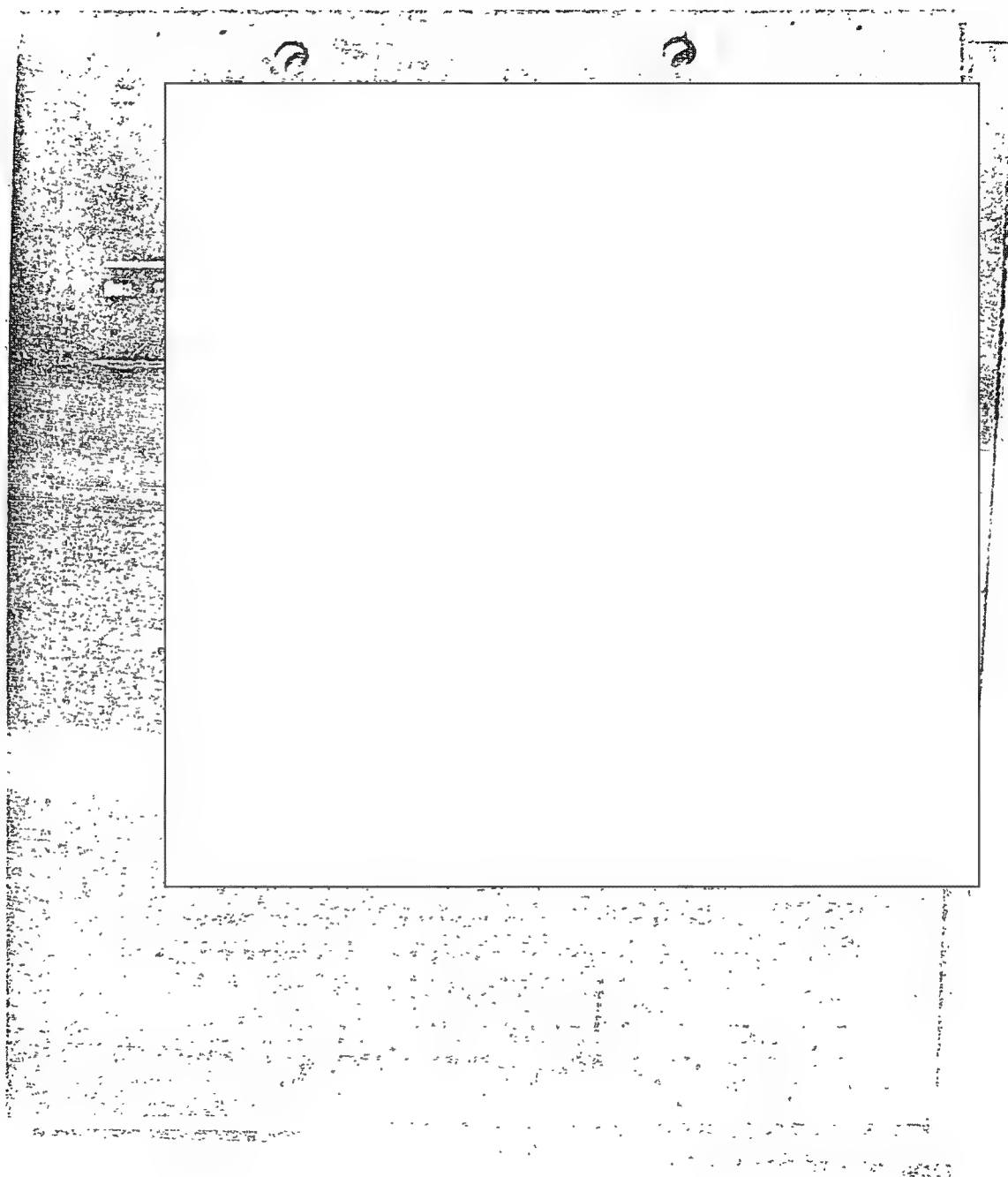


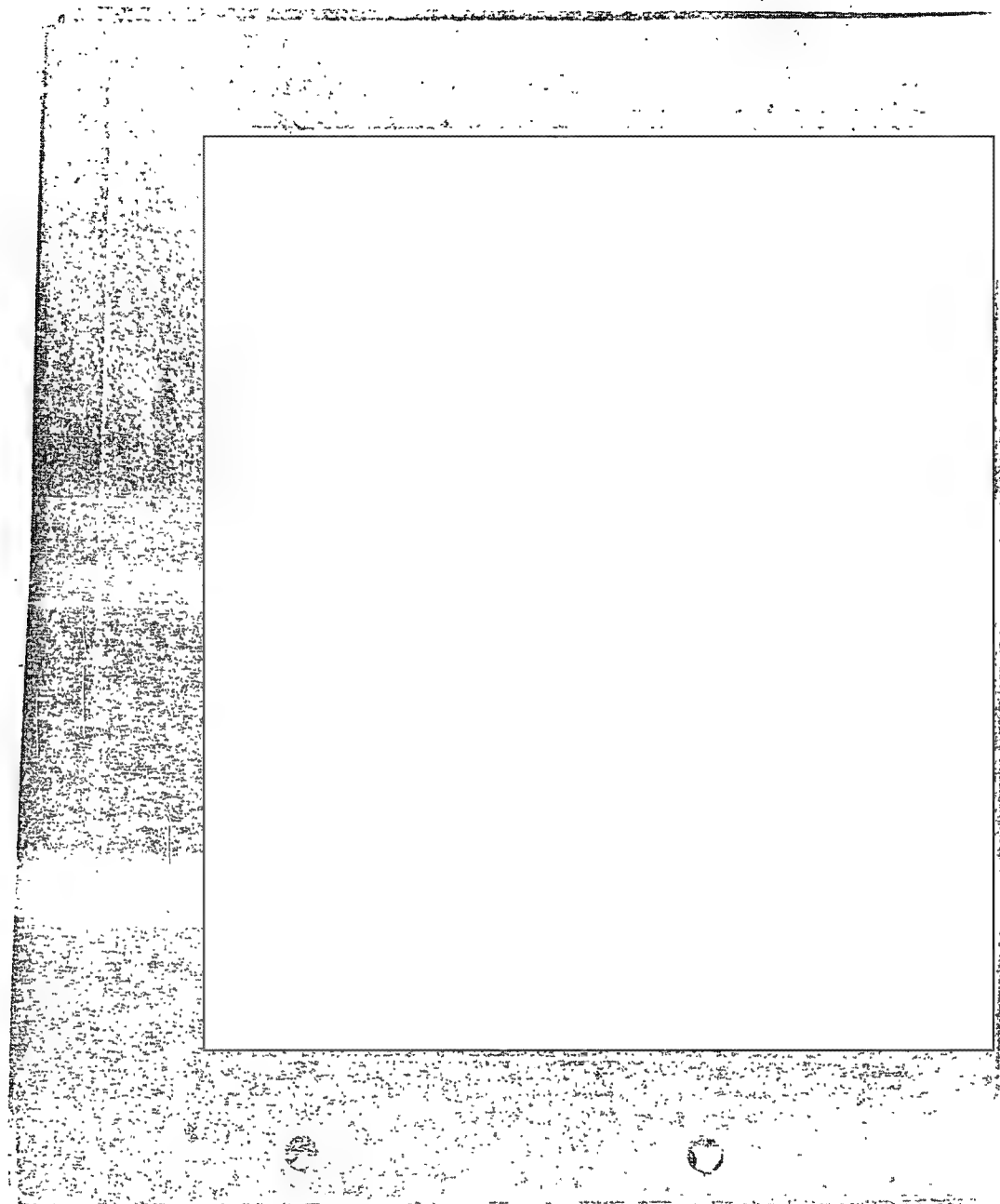


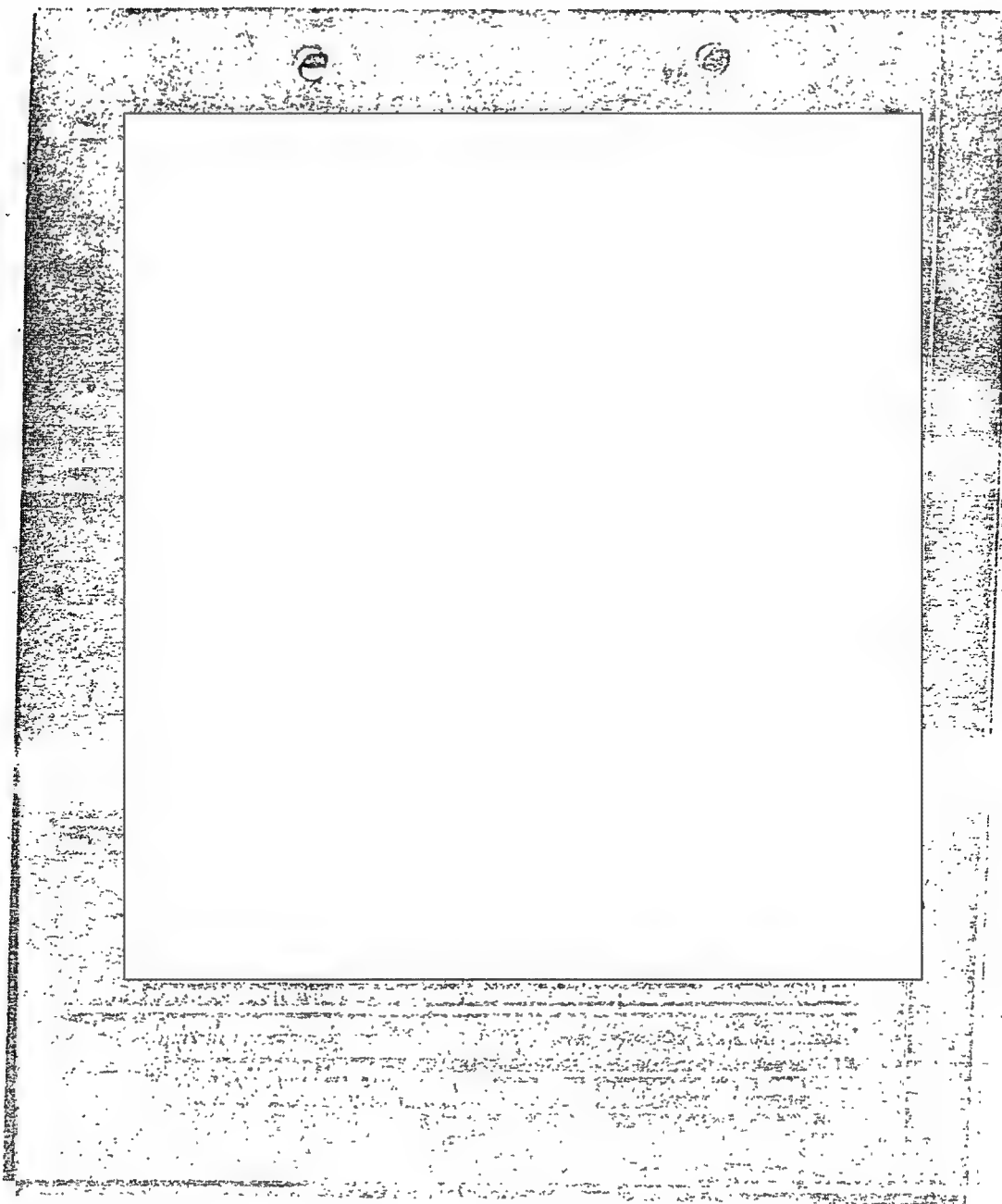


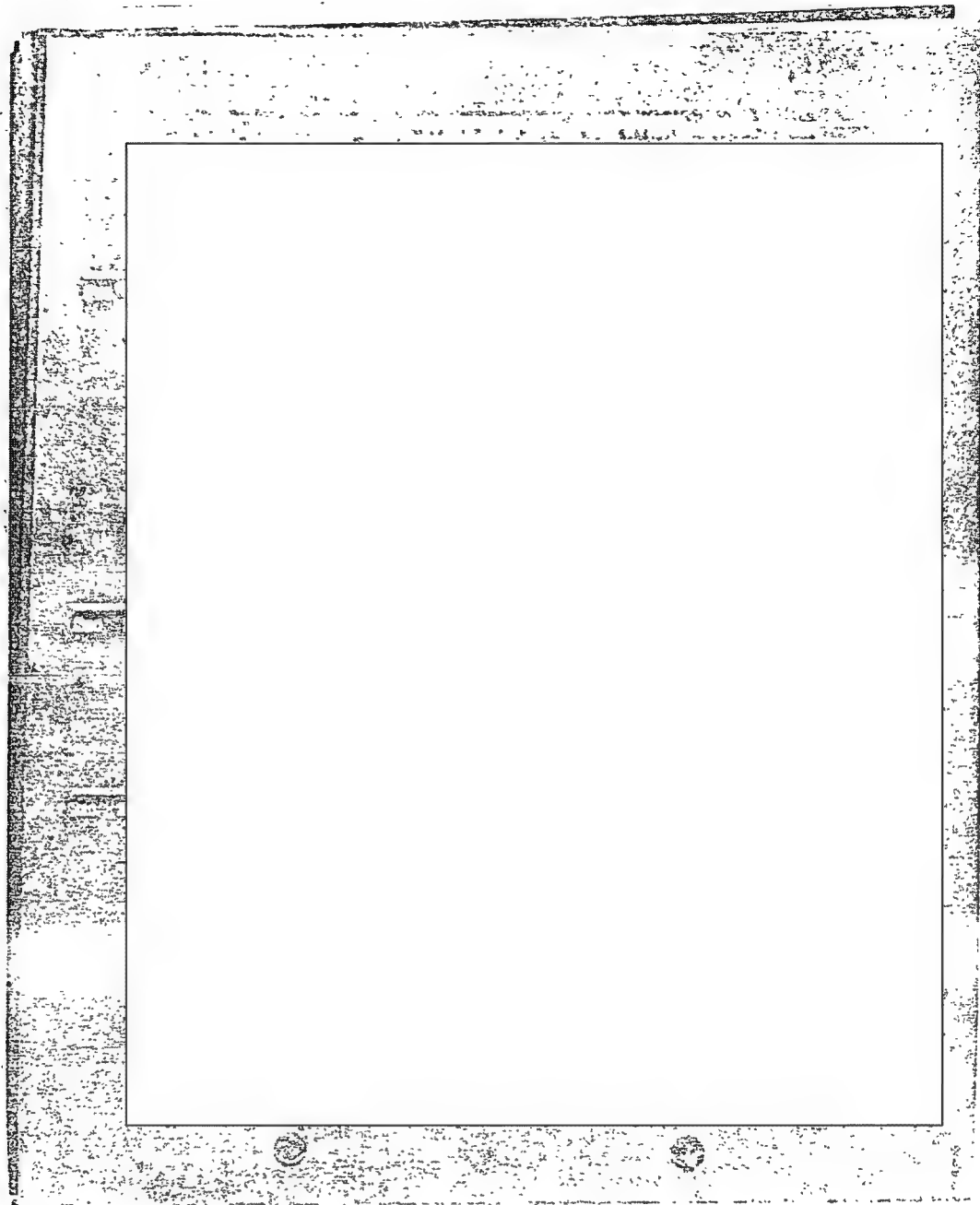


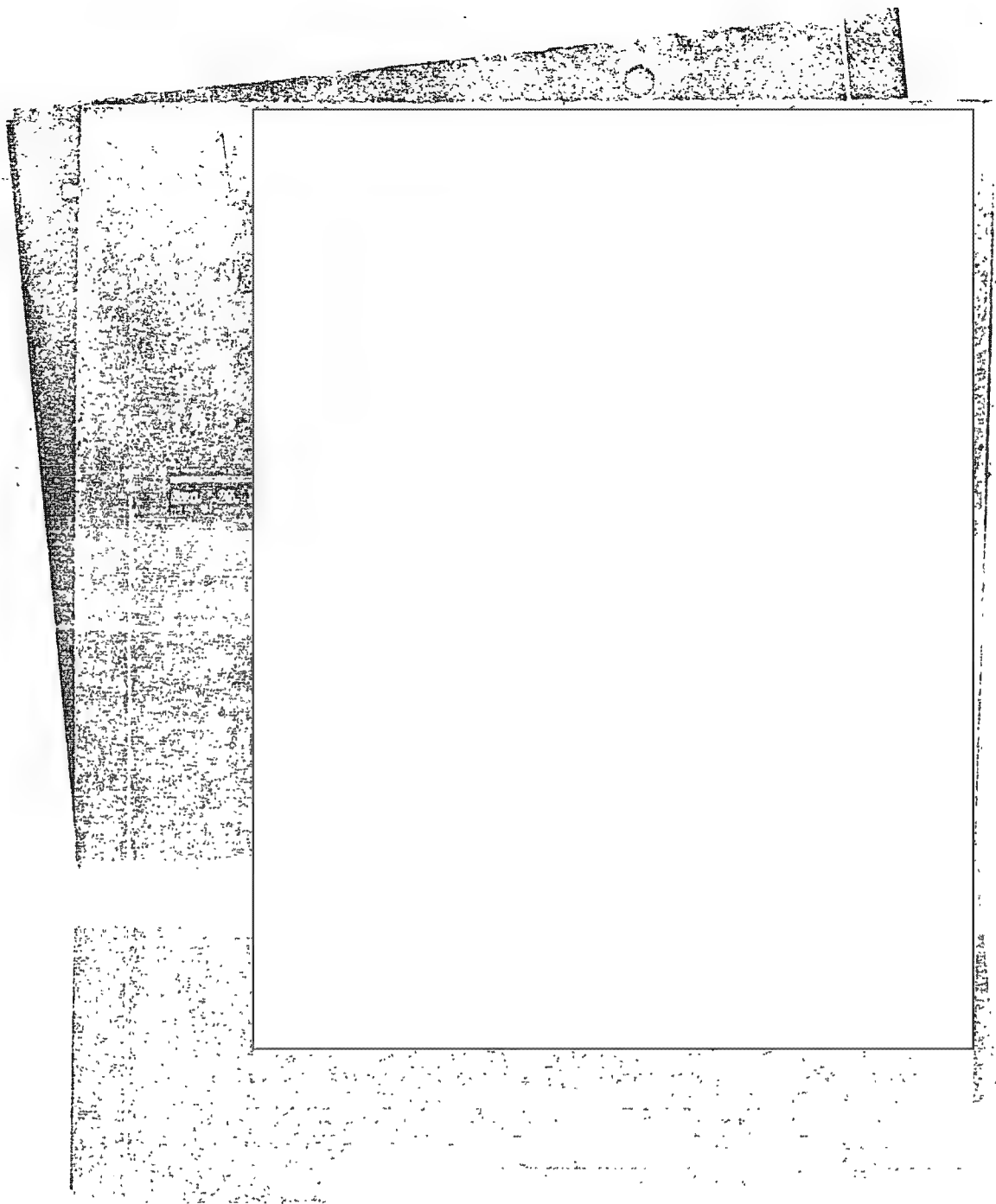


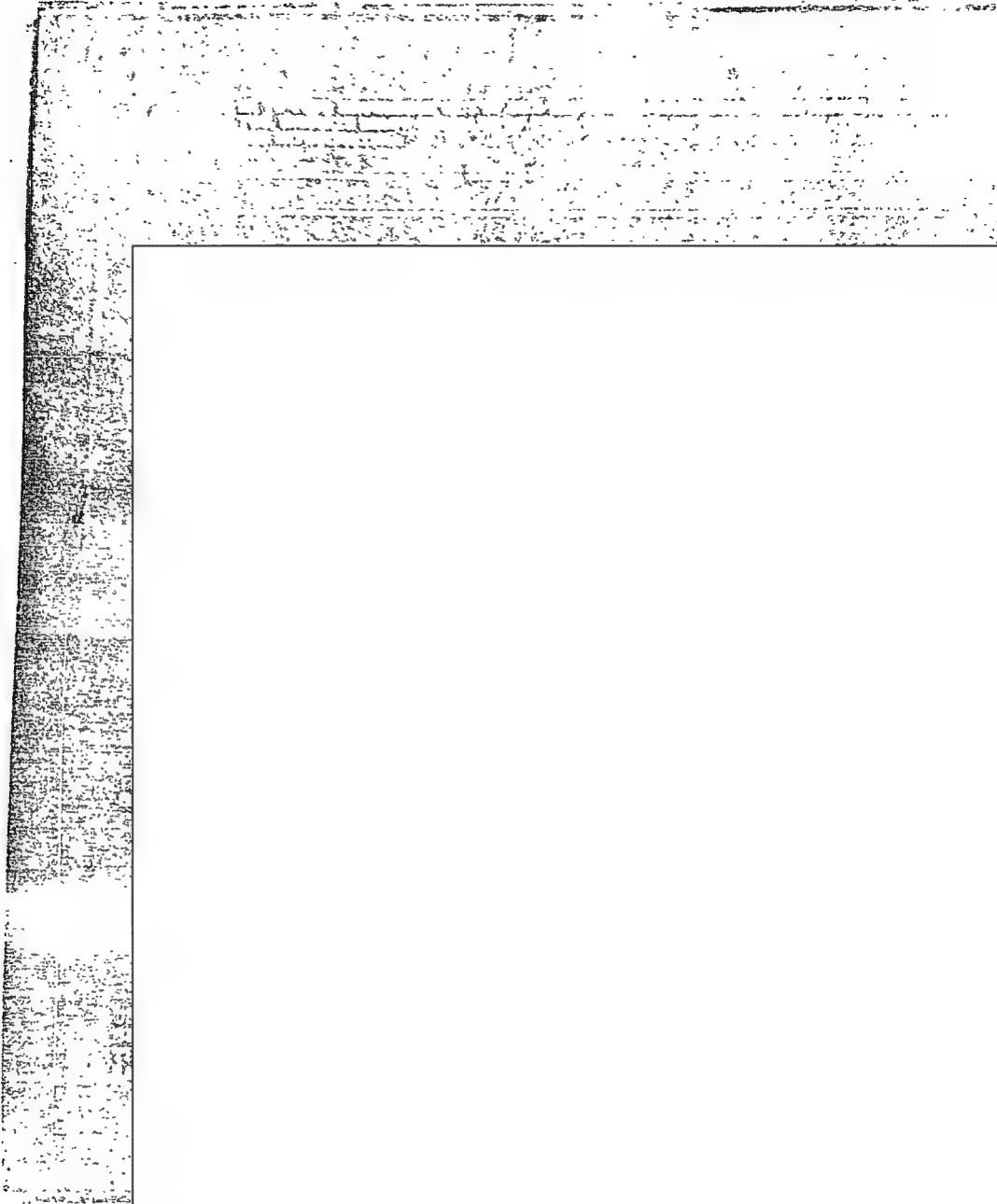


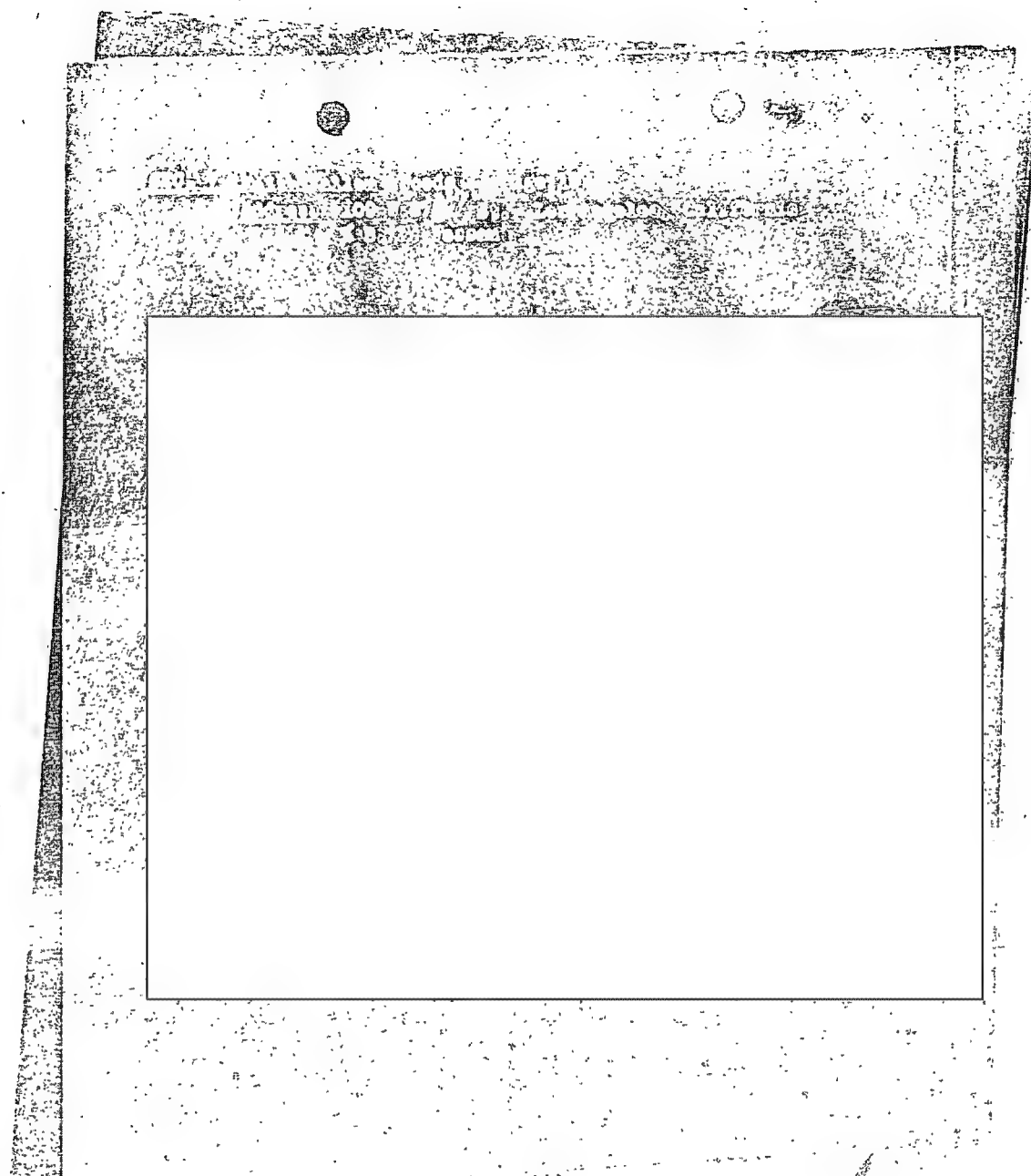












Aaker's School of Business

Grand Forks, North Dakota

REPORT OF PROGRESS

NAME

ADDRESS

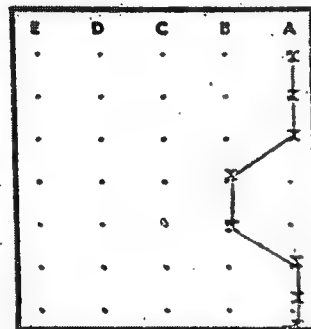
COURSE OF STUDY Accountancy

DATE December 14, 1951

SCHOLASTIC ACHIEVEMENT

SUBJECTS COMPLETED:

Elementary Accounting
Advanced Accounting
Income Tax
Cost Accounting (Elem.)
Typewriting
Spelling
Business Mathematics
Business Law
Penmanship
Salesmanship
Business English
Office Machines



KEY

A Superior
 B Above Average
 C Average
 D Fair
 E Slow

COMPLETED SUBJECTS

PERSONAL CHARACTERISTICS

INITIATIVE

QUALITY OF WORK

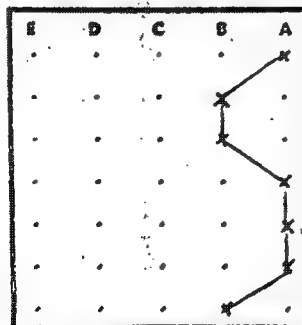
QUANTITY OF WORK

ENTHUSIASM

PUNCTUALITY

COOPERATION

ADAPTABILITY



	E	D	C	B	A
Needs Supervision		Routine Worker	Fairly Progressive	Resourceful	Marked Ability
Careless		Inaccurate	Passable	Good Quality	Highest Quality
Very Low Output		Low Output	Average Output	High Output	Very High Output
Indifferent		Occasionally Enthusiastic	Average	Determined	Confident
Undependable		Improvement Needed	Occasionally Absent or Late	Seldom Late	Always Punctual
Reluctant		Passive	Usually Agreeable	Co-operating	Co-operative
Limited		Slow	Average		

Manager

Please keep this report for future comparison

CONFIDENTIAL
SECURITY APPROVAL

Date: 26 March 1952

TO: Chief, Personnel Division

Your Reference: H-3007A

FROM: Chief, Security Division

Case Number: 61115

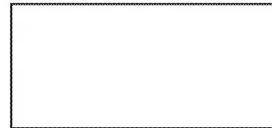
SUBJECT:

1. This is to advise you of security action in the subject case as indicated below:

- ☒ Security approval is granted the subject person for access to classified information.
- ☐ Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.
- ☐ The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of Paragraph H of Regulation 10-9.

2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.

3. Subject is to be polygraphed as part of the ECD procedures.



mt. 1/2: will call back:
called 1/2:
ok:

CONFIDENTIAL

clg 3/1/52 sent to & Kelly me

CONFIDENTIAL
SECURITY INFORMATION
INTEROFFICE MEMORANDUM

Date: 29 Feb. 1952

TO: Chief, Personnel Division

FROM: Chief, Security Division

SUBJECT:

Request No. H-3007-A

1. Reference is made to your request for security clearance of the subject person who is being considered for employment in the following position: File Clerk, GS-2, OSO, RI, Proc. & Rec., Washington, D. C.
2. This is to advise you of the following security action:

a. ☐ Provisional security clearance is granted to permit subject's employment on a temporary basis in the following area or in the following capacity:

This clearance is granted upon the condition that subject: 1. not have access to classified material; 2. not have access to secure areas; 3. not be issued a badge or credential; 4. not represent himself as a CIA employee; and 5. not be assigned to any unclassified duties other than indicated above.

b. ☒ Name checks have been completed on this person. Arrangements should now be made by your office for an interview in this Division. Upon completion of this interview further consideration will be given to the requested limited clearance for access to information classified no higher than Secret. If subject has not entered on duty under a previously granted provisional clearance the interview should be arranged after entrance on duty.

c. ☐ Subject is security approved for temporary appointment to a position requiring access to information classified no higher than Secret.

Officials of the employing office should be advised of this security limitation and should be instructed to supply future supervisors with advice as to the limitation so as to insure continued compliance.

Security action to effect full approval is continuing and your office will receive advice of full clearance upon completion of this action. Upon receipt of full security clearance, the present limitation will be rescinded and supervisors should be advised accordingly.

3.

*Out in
per S. Linder
5 min.*



CONFIDENTIAL

CONFIDENTIAL
SECURITY
INTEROFFICE MEMORANDUM

Date: 25 January 1952

TO: Chief, Personnel Division

FROM: Chief, Security Division

SUBJECT: Request No. H-3007

1. Reference is made to your request for security clearance of the subject person who is being considered for employment in the following position:

2. This is to advise you of the following security action:

a. ☒ Provisional security clearance is granted to permit subject's employment on a temporary basis in the following area or in the following capacity: D Street Pool.

This clearance is granted upon the condition that subject: 1. not have access to classified material; 2. not have access to secure areas; 3. not be issued a badge or credential; 4. not represent himself as a CIA employee; and 5. not be assigned to any unclassified duties other than indicated above.

b. ☐ Name-checks have been completed on this person. Arrangements should now be made by your office for an interview in this Division. Upon completion of this interview further consideration will be given to the requested limited clearance for access to information classified no higher than Secret. If subject has not entered on duty under a previously granted provisional clearance the interview should be arranged after entrance on duty.

c. ☐ Subject is security approved for temporary appointment to a position requiring access to information classified no higher than Secret.

Officials of the employing office should be advised of this security limitation and should be instructed to supply future supervisors with advice as to the limitation so as to insure continued compliance.

Security action to effect full approval is continuing and your office will receive advice of full clearance upon completion of this action. Upon receipt of full security clearance, the present limitation will be rescinded and supervisors should be advised accordingly.

3.

FILE SENT
TO N B I

RECEIVED 13 J

CONFIDENTIAL

OAF OF TERMINATED FILE BEING MICROFILMED